

FILE NOW: FILING FEE IS \$61.25

FILED

May 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. [unclear]
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 700065 (6)
1. Corporation Name
WELBOURNE AVENUE NURSERY AND KINDERGARTEN, INC.

Principal Place of Business Mailing Address
450 W WELBOURNE AVE 450 W WELBOURNE AVE
WINTER PARK FL 32789 WINTER PARK FL 32789-4258

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent
JENKINS, EULA P
434 GARFIELD AVE
WINTER PARK FL 32789

3. Date Incorporated or Qualified 10/20/1959 3a. Date of Last Report 04/04/1996
4. FEI Number 59-0704742 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent
81 Name Edwin C. Wright
82 Street Address (P.O. Box Number is Not Acceptable) 1549 N. Ridge Lake Cir.
83
84 City Longwood FL 85 Zip Code 32750

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE Edwin C. Wright, President 4/15/97

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PP WRIGHT, EDWIN C 1549 N. RIDGE LAKE CIR LONGWOOD FL
V JENKINS, EULA P. 434 GARFIELD AVE, WINTER PARK FL
S WALKER, CAROLYN 1200 CORETTA WAY ORLANDO FL
D FAYSON, ROBERTA 651 COMSTOCK AVE. WINTER PARK FL
D BROWN, LEROY J 450 W. CANTON AVE. WINTER PARK FL
T BOYER, CLEM J 180 ROSEWIND TR MAITLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE D RICHARD JOHNSON
1.2 NAME RICHARD JOHNSON
1.3 STREET ADDRESS PO BOX 491
1.4 CITY-ST-ZIP WINTER PARK, FL 32790
2.1 TITLE V MARY DANIELS
2.2 NAME MARY DANIELS
2.3 STREET ADDRESS 650 CANTON AVE.
2.4 CITY-ST-ZIP WINTER PARK, FL 32789
3.1 TITLE D JEAN MATHIS
3.2 NAME JEAN MATHIS
3.3 STREET ADDRESS 500 NEW YORK AVE.
3.4 CITY-ST-ZIP WINTER PARK, FL 32789
4.1 TITLE D DEBORAH WRIGHT
4.2 NAME DEBORAH WRIGHT
4.3 STREET ADDRESS STERLING PARK ELEMENTARY
4.4 CITY-ST-ZIP EAGLE CIRCLE CASSELBERRY, FL 32703
5.1 TITLE D FAIROLYN H. LIVINGSTON
5.2 NAME FAIROLYN H. LIVINGSTON
5.3 STREET ADDRESS 1835 ALBERT LEE PKWY.
5.4 CITY-ST-ZIP WINTER PARK, FL 32789
6.1 TITLE D MABEL MATHIS
6.2 NAME MABEL MATHIS
6.3 STREET ADDRESS 730 CANTON AVE.
6.4 CITY-ST-ZIP WINTER PARK, FL 32789

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

CR2E037 (9/96)