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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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	FILEI)
Feb 03	1998	8:00am
Secre	etary c	of State

1. Corporation	on Name 7 (4/90	(0)					
THE LITTLE SCHOOLHOUSE, INC.							
	THEE CONCENCES, 1140.				1 286 16 70 68 160 1 166 160 186 186 186 166 166 166 166 166 166 166 166 166		
Principal Place of Susiness Mailing Address			I (motes 1800) state giall (mata inite atte diali atat	81811 #F811 #18	11 84841 1381		
1100 N. ANDREWS AVENUE 1100 N. ANDREWS AVE				3. Date Incorporated or Qualified			
FT. LAUDERDA		FT LAUDERDALE FL 33311			06/19/1968		
บร		US			4. FEI Number	Ap	plied For
					59-1220813		t Applicable
Principal Place of Business 2a. Mailing Address				^	5. Certificate of Status Desired	\$8.75 A	dditional
27 808 NE 3 Ave 26 808 NE :		<u> </u>	Ave	3. Certificate of Status Desired	Fee Re	quired	
Suite, Apt. #, etc.					6. Election Campaign Financing	\$5.00 N	
22 27 27 26 26 27 27 26 26 27 27 27 27 27 27 27 27 27 27 27 27 27					Trust Fund Contribution	Added to	
City & State City & State 23 Ft, Lauderdale FL 28 Ft, Lauderdale			and)	ob El	7. Is this nonprofit corporation a homeowners	association No	i? .
Zip	Country	Zip /	Count	try -	8. This corporation owes or has paid the curre		
	304 115A	_ / < / > 1/. E	io L	USA -			l No
	9. Name and Address of Current	11	, <u> </u>		10. Name and Address of New Registered Ag		
			8	Name	÷		
GARDNER, MERCEDES			8	32 Street Addre	ss (P.O. Box Number is Not Acceptable)		
1813 NE 28 ST.				(10,,			
FORT LAUDERDALE FL 33306		8	13				
			8	4 City	·	85 Zip C	ode
				1 1	F L		
11. Pursuant office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State o	and 617.1508, Florida Statutes f Florida. Such change was au	s, the about thorized	ove-named corporation	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoi	hanging its ntment as r	registered registered
agent. I a	rn familiar with, and accept the obligati	ons of, Section 617.0503, Flori	da Statut	tes.	, , , , ,		
SIGNATURE .	Signature, typed or printed name of registered agent	and tile if an exactle (67577)	Clasionera d	Agent signature required	d when reinstatino) DATE		
12.	OFFICERS AND		13.	deur adrierme tednier	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS	3 IN 12
TITLE	VPD	X DELETE	1.1 TITLE	Ē		Change	Addition
NAME	STALETOVICH, PATSY	. ,	1.2 NAM	E .			
STREET ADDRESS	2424 NE 17 TERR.		1,3 STRE	ET ADDRESS			li li
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY	-ST-ZIP			
TITLE	MD	☐ DELETE	2.1 TITLE			Change	Addition
NAME	WARD, JANE		2.2 NAM	E			
STREET ADDRESS	3715 S LAKE DRIVE		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL		2. 4 CITY	/-ST-ZIP	. Dec .		
TITLE	PD	☐ DELETE	3.1 TITLE	: '		_ Change	Addition
NAME	PAYNE, BARBARA		3.2 NAM	E			1
STREET ADDRESS	1612 S.E. 9TH STREET		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			/-ST-ZIP		T a.	
TITLE	TD	DELETE	4.1 TITLE		-	Change	Addition
NAME	GARDNER, MERCEDER		4. 2 NAM	ŀ			
STREET ADDRESS	1813 NE 28 ST			ET ADDRESS			
	FT LAUD FL		4.4 CITY			To:	Addition
CITY-ST-ZIP		- Determ					1 DEFENDED I
TITLE	S	☐ DELETE	5.1 TITLE	1	L	Change	
TITLE NAME	S CAMPBELL, MARIAN	DELETE	5.2 NAM	E	L	_ Change	
TITLE NAME STREET ADDRESS	S CAMPBELL, MARIAN 4321 NE 15TH TERR	☐ DELETE	5.2 NAMI 5.3 STRE	ET ADDRESS	L	_ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAMPBELL, MARIAN		5.2 NAMI 5.3 STRE 5.4 CITY	ET ADDRESS - ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S CAMPBELL, MARIAN 4321 NE 15TH TERR	DELETE	5.2 NAMI 5.3 STRE 5.4 CITY 6.1 TITLE	ET ADDRESS - ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S CAMPBELL, MARIAN 4321 NE 15TH TERR		5.2 NAMI 5.3 STRE 5.4 CITY 6.1 TITLE 6.2 NAMI	ET ADDRESS -ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S CAMPBELL, MARIAN 4321 NE 15TH TERR		5.2 NAMI 5.3 STRE 5.4 CITY 6.1 TITLE 6.2 NAMI	E ET ADDRESS -ST-ZIP E ET ADDRESS			

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in section 119.07(3)(i), Florida statutes. 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 if changed, or on an attachment with an address.