## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N00000002431

## MIAMI-DADE SCHOOL READINESS COALITION, INC.

Principal Place of Business SCHOOL READINESS COALITION MIAMI-DADE Mailing Address

EARLY CHILDHOOD INITATIVE. FLORIDA INT

**FILED** Aug 26, 2002 8:00 am Secretary of State

08-26-2002 90069 023 \*\*\*\*61.25

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MIAMI FL 33129		MIAMI FL 33199  3. Mailing Address Miami - Dade						
								Suite, Apt. #, etc.
		3250 SW Third	3250 SW Third Ave, 5th Floor					
		Mi		City & State Miami, Florid	City & State fiami, Florida		4. FEI Number 59-08	<b>59-0830840</b> Not Applicable
Zip	Country	Zip 33129	Countr DADE	Ė	5. Certificate of Status	Desired L Fe	8.75 Add ee Require	ed
	6. Name and Address of Current	t Registered Agent	-		7."Name and Address	of New Registered Ag	jent	
			L'	Vame				
HOOD, C	HARLES M III		(	Street Address (I	P.O. Box Number is Not A	(cceptable)		
	THIRD AVENUE/ 5TH FLOOR							
MIAM1 FL	33129		<del> </del> ,	City			Zip Code	(a
				Jily		FL	Zip Coo	6
the obliga	tions of registered agent.  Signature, typed or printed name of registered agen	at and title if applicable. (NC	)TE: Registered Aç	ent signature required	( when reinstating)	DATE		
	After September 13, 2002, min. will be \$236.25.	1	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	Make Check Payable to Department of State		
10.	OFFICERS AND DI		11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES T			1 10
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NAME STREET ADDRESS	JOHNSON, PATRICIA G 815 NW 57TH AVE. STE. 100		TITLE	CD		1	Change	☐ Addition
CITY-ST-ZIP			NAME	l		<u> </u>	Change	☐ Addition
			and the second	ODRESS			Change	☐ Addition
TITLE	MIAMI FL 33126	Delete	NAME STREET A CITY-ST-	ODRESS ZIP				
TITLE NAME		☐ Delete	NAME STREET A	ODRESS			Change	☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for indicated on this report or supplemental report is true and accurate and that most the corporation or the receiver or trustee empowered to execute this report a changed, or on an attachment with an address, with all other like empowered. 119.07(3)(i), Florida Strutes. I further certify that the information legal effect as if made under oath; that I am an officer or director ida Statutes; and that I is name appears in Block 10 or Block 11 if

TITLE

NAME

REET ADDRESS

**SIGNATURE:** 

BROWN, KARIN

**MIAMI FL 33157** 

15201 SW 82ND AVENUE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

David Lawrence Jr.

XXXIete

8/21/02

(305) 646-7229

☐ Change

Addition