

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010680

FILED
Jan 19, 2009
Secretary of State

Entity Name: SENIORNET LEARNING CENTER OF BOYNTON BEACH, INC.

Current Principal Place of Business:

C/O JCC @ 8500 JOG ROAD
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

Current Mailing Address:

C/O JCC @ 8500 JOG ROAD
BOYNTON BEACH, FL 33437 US

New Mailing Address:

FEI Number: 36-4563154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSTROWSKI, EDWARD A JR.
611 SE 7TH STREET
PH1
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OSTROWSKI, EDWARD A JR.
Address: 611 SE 7TH STREET PH1
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: VP () Delete
Name: PERRY, FRED
Address: 6971 ASHTON STREET
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: TREA () Delete
Name: SACHAROW, HELENE
Address: 2560 RIVERVIEW DRIVE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: DIR () Delete
Name: KOZLIN, RAY
Address: 10557 ROYAL CARIBBEAN CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: DIR () Delete
Name: GROSS, JOEL
Address: 5798 GRAND HARBOUR CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: DIR () Delete
Name: GRONERT, ELAINE
Address: 4620A MAHOE TREE PLACE
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD A OSTROWSKI, JR.

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date