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2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State
02-16-2001 90021 018 ****61.25

DOCUMENT # N38335

1. Entity Name

FLORIDA SCHOOL-AGE CHILD CARE COALITION, INC.

29733

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
FSACCC PO BOX 590042 ORLANDO FL 32859-0042 US	FSACCC PO BOX 590042 ORLANDO FL 32859-0042 US

2. Principal Place of Business	3. Mailing Address
PO Box 16552	PO Box 16552
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: West Palm Beach, FL	City & State: West Palm Beach, FL
Zip: 33405 Country: US	Zip: 33405 Country: US

4. FEI Number: 59-3062864 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NGE, JUDY 8487 155TH PLACE N PALM BEACH GARDENS FL 33418	Name: Alison Pruitt Street Address (P.O. Box Number is Not Acceptable): 349 Granada Road City: West Palm Beach FL Zip Code: 33401

8. 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: Alison Pruitt 1-25-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NEE, JUDY 8487 155TH PLACE N PALM BEACH GARDENS FL 33418	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Past President Director	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PP FABER, JENNIFER 6973 KIMBERLY TERR FORT MYERS FL 33919-6	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HELDE, RHONDA 200 LOZAHATCHEE JUPITER FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President-Elect	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KOENIG, DIANE 12050 E COLONIAL DR ORLANDO FL 32836	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BROOKBANK, ANNA 9241 SWEDEN BLVD PUNTA GORDA FL 33982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Diann Holmberg 840 SW	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary - Director Diann Holmberg 840 SW 81st Ave North Lauderdale, FL 33068	☐ Change ☒ Addition

CR2E037 (10/00)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Alison Pruitt 1-25-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #