NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N93000002972

CHRIST LUTHERAN CHURCH PRE-SCHOOL, INC.

Country

9. Name and Address of Current Registered Agent

25

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

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29

1955 E OAKLAND PARK BLVD FT LAUDERDALE FL 33306

2. Principal Place of Business

Suite, Apt. #, etc.

CROUCHER, GARY

1955 E OAKLAND PARK BLVD

CHRIST LUTHERAN CHURCH FT LAUDERDALE FL 33306

City & State

22

23

24

Zip

1955 E OAKLAND PARK BLVD FT LAUDERDALE FL 33306

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90063 023 ****61.25

1268416. 90063 . 33 1 4 3. Date Incorporated or Qualifed 07/22/1993 4. FEI Number Applied For 65-0461224 Not Applicable \$8.75 Additional 5.1 Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)

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.

Country

81

83

84 City

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SIGNATURE		,				DATE	
	Signature, typed or printed name of registered agent and title i		signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	OFFICERS AND DIRE		13.				
TITLE	D	☐ DELETE	1.1 TITLE	Paracion	ښه سه در س	Change	Addition
NAME	CROUCHER, GARY		1.2 NAME	PARISEK, KI	-NAIC	a — · · ·	
STREET ADDRESS	1658 NE 36 STREET		1.3 STREET ADDRESS	1851 NE 3	4 Cour	-/ 2224/	
CITY-ST-ZIP	OAKLAND PARK FL	4	1.4 CITY-ST-ZIP	PARISEK, RI 1851 NE 3 FT. LAUDER	DALE, I	2 33306	
TITLE	D	DELETE	2.1 TITLE		_	☐ Change	Addition
NAME	SHELEY, KATHIE		2.2 NAME		•		
STREET ADDRESS	1610 NE 40TH COURT		2.3 STREET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL		2, 4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	3.1 TITLE			Change	Addition
NAME	BUCHTA, CATHY		3.2 NAME				
STREET ADDRESS	4680 NE 3 TERRACE		3.3 STREET ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL		3.4. CITY-ST-ZIP		•		
TITLE	D	☐ DELETE	4.1 TITLE			Change	Addition
NAME	QUINA, PATRICIA		4. 2 NAME				
STREET ADDRESS	119 ROYAL PARK DR #4H		4.3 STREET ADDRESS				
CITY-ST-ZIP	OAKLAND PARK FL		4.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	GRABOWSKI, LINDA		5.2 NAME	,	•		
STREET ADORESS	2147 NE 62 COURT		5.3 STREET ADDRESS	•			ì
CITY-ST-ZIP	FT LAUDERDALE FL		5.4 CITY-ST-ZIP			· , _ ·	
TITLE	D	☐ DELETE	6.1 TITLE			Change	Addition :
NAME	FUREY, KATHY		6.2 NAME				
STREET ADDRESS	341 SE 5 ST		6.3 STREET ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33060		6.4 CITY-ST-ZIP				
14. 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 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, with all other like empowered.

SIGNATURE:

Zip Code

85