2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State
03-27-2002 90064 038 ****61.25

DOCUMENT # N97000002460

1. Entity Name

BROWARD COUNTY HOMESCHOOL PARENT SUPPORT GROUP, INC.

Principal Place of Business	Mailing Address
7780 NW 39TH ST HOLLYWOOD FL 33024 US	7780 NW 39TH ST HOLLYWOOD FL 33024 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0754631 ☐ 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
BUCHER, CHRISTINE 7780 NW 39TH ST HOLLYWOOD FL 33024	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
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	TD WINDLE, DANNELL 8211 SW 57TH ST DAVIE FL 33328	☐ Delete	D Kathie Smith 4220 SW 53rd Ave Davie, FL 33314	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GLADFELTER, JOAN 10898 NW 23RD CT SUNRISE FL 33323	☐ Delete	D Joan Gladfelter 10898 NW 23rd Ct. Sunrise, FL 33322	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CAPITA, HARRIET 3140 NW 65TH DR FORT LAUDERDALE FL 33309	☐ Delete	LeeAnn Hansen D 13485 NW 5 Ct. Plantation, FL 33325	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEINZMAN, BETH 10640 NW 26 PL SUNRISE FL 33322	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VALERIO, CHERYL 7021 PARK ST HOLLYWOOD FL 33024	☐ Delete	SD Cheryl Valerio 10971 NW 38th Ct, Coral Springs, FL 33065	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RABOLLI, JOANNE 7651 NW 74TH AVE TAMARAC FL 33321	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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: Christine Bucher CHRISTINE BUCHER Christine Bucher 3/15/02 954-436-8453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #