

2000 UNIFORM BUSINESS REPORT (UBR)

2/

FILED
May 02, 2000 8:00 am
Secretary of State

02-22-2000 90011 041 ****61.25

DOCUMENT # N98000001622

i. Entity Name

GOLDEN ACRES CHILD CARE CENTER, INC.

Principal Place of Business W. ATLANTIC BLVD. BCH FL 33061-2006	Mailing Address 321 W. ATLANTIC BLVD. POMPANO BCH FL 33060-6048
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DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address	4. FEI Number 52-2103708	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State	City & State		
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ADDERLY, RALPH W 321 W. ATLANTIC BLVD. POMPANO BCH FL 33061-2006		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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: *Ralph W Adderly* (NOTE: Registered Agent signature required when reinstating) DATE: **2/4/00**

**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**

OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
D	GLENN, JIMMIE 416 NW 9TH AVE. POMPANO BCH FL 33060	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D	SMITH, JOSEPH 1501 NW 3RD WAY POMPANO BCH FL 33060	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
SD	ADDERLY, RALPH W P. O. BOX 2006 POMPANO BCH FL 33061	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D	POITIER, WOODROW 901 NW 4 AVE POMPANO BCH FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D	SUTTON, GLADYS 217 NW 9TH ST. POMPANO BCH FL 33060	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		NAME STREET ADDRESS CITY-ST-ZIP	Patricia Mack 510 NW 16th Court Pompano Beach, FL 33060

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 links empowered.

SIGNATURE: *[Signature]* DATE: **2/4/00**

CR2E037 (9/99)

N98000001622

200686

Golden Acres Child Care Center
Board of Directors
2000-2001

Reference Number: N98000001622

Glenn, Jimmie – President

Smith, Joseph – Vice-President

Adderly, Ralph – Secretary

Poitier, Woodrow – Commissioner

Sutton, Gladys – Commissioner

Mack, Patricia – Commissioner

