

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000010221

Entity Name: SUNSHINE ACADEMY OF OAKLAND PARK INC.**Current Principal Place of Business:**2360 WEST OAKLAND PARK BOULEVARD
OAKLAND PARK, FL 33311**Current Mailing Address:**2360 WEST OAKLAND PARK BOULEVARD
OAKLAND PARK, FL 33311 US**FEI Number:** 81-4868827**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOOD, JEFFREY S ESQ.
C/O TRIPP SCOTT
110 SE 6TH STREET
FORT LAUDERDALE, FL 33301 US*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:** JEFFREY S. WOOD

06/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name CASACCI, JOSEPH
Address 2360 WEST OAKLAND PARK
BOULEVARD
City-State-Zip: OAKLAND PARK FL 33311

Title D, S
Name SILVER, MARION
Address 2360 WEST OAKLAND PARK
BOULEVARD
City-State-Zip: OAKLAND PARK FL 33311

Title D
Name MILGRAUM, GLENN
Address 2360 WEST OAKLAND PARK
BOULEVARD
City-State-Zip: OAKLAND PARK FL 33311

Title D
Name KEREN, PAULETTE
Address 2360 WEST OAKLAND PARK
BOULEVARD
City-State-Zip: OAKLAND PARK FL 33311

Title BOARD MEMBER
Name PIERCY, STEVEN
Address 2360 WEST OAKLAND PARK
BOULEVARD
City-State-Zip: OAKLAND PARK FL 33311

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH CASACCI**DIRECTOR**

06/29/2020

Electronic Signature of Signing Officer/Director Detail

Date