

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006331

Entity Name: CENTER FOR CREATIVE EDUCATION, INC.**Current Principal Place of Business:**425 24TH ST.
WEST PALM BEACH, FL 33407**Current Mailing Address:**425 24TH ST.
WEST PALM BEACH, FL 33407**FEI Number:** 65-0594599**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAMON, ROBERT L
425 24TH ST.
WEST PALM BEACH, FL 33407 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:** ROBERT L. HAMON

04/02/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CEO
Name HAMON, ROBERT L
Address 215 GARDENIA ISLES DRIVE
City-State-Zip: WEST PALM BEACH FL 33418

Title VICE CHAIR
Name KUKLA, MICHELE
Address 701 WARREN DRIVE
City-State-Zip: JUPITER FL 33458

Title SECRETARY
Name BRAINERD, ALAN
Address 1701 S. FLAGLER DRIVE
 APT. 1409
City-State-Zip: WEST PALM BEACH FL 33401

Title CHAIRMAN
Name MEANY, JAMES B.
Address 241 ROYAL PALM WAY
City-State-Zip: PALM BEACH FL 33480

Title TREASURER
Name MILLER, PAMELA
Address 6500 WASHINGTON ROAD
City-State-Zip: WEST PALM BEACH FL 33405

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: ROBERT L. HAMON

PRESIDENT & CEO

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date