

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

NON-PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 553663 (6)

1. Corporation Name

MARJORY OTT'S CHILDREN'S CLOTHING, INC.



Principal Place of Business

36 OCEANSIDE CENTER  
POMPANO BEACH FL 33062

Mailing Address

36 OCEANSIDE CENTER  
POMPANO BEACH FL 33062

3. Date Incorporated or Qualified  
09/26/1977

3a. Date of Last Report  
04/20/1995

2. Principal Place of Business

2a. Mailing Address

21 216 COMMERCIAL BLVD.  
Suite, Apt. #, etc.

26 216 COMMERCIAL BLVD.  
Suite, Apt. #, etc.

4. FEI Number

59-1766921

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

22 City & State

27 City & State

23 LAUDERDALE-BY-THE-SEA, FL.

28 LAUDERDALE-BY-THE-SEA, FL.

24 Zip 33308

25 Country

29 Zip 33308

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~SHARON MCNEIL~~  
2000 UNIVERSITY DR  
SUITE 1200  
PLANTATION FL 33324

81 Name

Peggy Ullmann

82 Street Address (P.O. Box Number is Not Acceptable)

516 N.E. 21st Drive

83

Ft. Lauderdale, FL 33305

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Peggy Ullmann

PEGGY ULLMANN - PRESIDENT

5-29-96

Signature of registered agent and then if applicable

Signature of Registered Agent (signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
ST	MCFEDRIDGE, MARJORIE E.	516 N.E. 21ST DR.	FT. LAUDERDALE FL	
PD	ULLMANN, PEGGY J.	516 N.E. 21ST DR.	FT LAUDERDALE FL	

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: PEGGY J. ULLMANN Peggy J. Ullmann 4-29-96 954941-0658

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2E034 (12/95)