

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702284

FILED
Feb 12, 2004
Secretary of State**Entity Name:** SPIRIT OF CHRIST CHILD DEVELOPMENT CENTER & ACADEMY, INC.**Current Principal Place of Business:**18801 W. DIXIE HIGHWAY
MIAMI, FL 33180**New Principal Place of Business:****Current Mailing Address:**18801 W. DIXIE HIGHWAY
MIAMI, FL 33180**New Mailing Address:****FEI Number:** 59-1024806**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LAMB, REGINA T
18801 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAMB, REGINA T
Address: 9331 SW 7TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VD () Delete
Name: LAMB, CECIL
Address: 9331 SW 7TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: TD () Delete
Name: HONER, LAJUANA
Address: 2200 NE 173RD STREET #2
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: D () Delete
Name: NEGRON, BETTY
Address: 5008 SW 168TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: RANDOLPH, VENUS
Address: 505 NW 177TH STREET #216
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: MCLEROY, DELPHINE
Address: 2109 NW 56TH STREET
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: REGINA T. LAMB

PD

02/12/2004

Electronic Signature of Signing Officer or Director

Date