

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90019 046 ****70.00

DOCUMENT # 710249

1. Entity Name

THELMA B. PITTMAN JUPITER PRE-SCHOOL, INC.

Principal Place of Business

Mailing Address

98 CINQUEZ PK RD. W.
 JUPITER FL 33458
 US

98 CINQUEZ PK RD. W
 JUPITER FLA 33458-3947
 US

2. Principal Place of Business

98 Cinquez Park Road, W.

3. Mailing Address

98 Cinquez Park Rd., W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Jupiter, FL

City & State
Jupiter, FL

4. FEI Number

59-1141608

Applied For

Not Applicable

Zip
33458

Country
Palm Beach

Zip
33458

Country
Palm Beach

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAWSON, RUTH S
1747 37TH ST
WEST PALM BEACH FL 33407

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** Delete
 NAME **RYAN, SUSAN**
 STREET ADDRESS **19428 GULFSTREAM DR.**
 CITY-ST-ZIP **TEQUESTA FL 33469**

TITLE **PMD** Change Addition
 NAME **Ruth S. Lawson**
 STREET ADDRESS **1747-37th Street**
 CITY-ST-ZIP **Jupiter, Fl 33458**

TITLE **VPD** Delete
 NAME **MAGROGAN, PATRICIA**
 STREET ADDRESS **12 W RIVERSIDE DR**
 CITY-ST-ZIP **TEQUESTA FL 33469**

TITLE **VPSD** Change Addition
 NAME **Thomas Boyhan**
 STREET ADDRESS **19005 Talon Way**
 CITY-ST-ZIP **Tequesta, Fl 33458**

TITLE **SD** Delete
 NAME **LAWSON, RUTH S**
 STREET ADDRESS **1747 37TH ST**
 CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE **TD** Change Addition
 NAME **Clay Lairsey**
 STREET ADDRESS **3338 Collin Drive**
 CITY-ST-ZIP **West Palm Beach, Fl 33406**

TITLE **D** Delete
 NAME **PITTMAN, THELMA**
 STREET ADDRESS **17276 ROAD 67**
 CITY-ST-ZIP **JUPITER FL 33468**

TITLE **-** Change Addition
 NAME **-**
 STREET ADDRESS **-**
 CITY-ST-ZIP **-**

TITLE **T** Delete
 NAME **LAIRSEN, CLAY**
 STREET ADDRESS **3338 COLLIN DR**
 CITY-ST-ZIP **WEST PALM BEACH FL 33406**

TITLE **-** Change Addition
 NAME **-**
 STREET ADDRESS **-**
 CITY-ST-ZIP **-**

TITLE **-** Delete
 NAME **-**
 STREET ADDRESS **-**
 CITY-ST-ZIP **-**

TITLE **-** Change Addition
 NAME **-**
 STREET ADDRESS **-**
 CITY-ST-ZIP **-**

12. 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 like empowered.

SIGNATURE:

Ruth S. Lawson
RUTH S. LAWSON

Date

2/29/00 (561)746-7120

Daytime Phone #

CR2E037 (9/99)