

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710249

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: THELMA B. PITTMAN JUPITER PRE-SCHOOL, INC.

**Current Principal Place of Business:**

17593 CINQUEZ PARK ROAD WEST  
JUPITER, FL 33458 US

**New Principal Place of Business:**

**Current Mailing Address:**

17593 CINQUEZ PARK ROAD WEST  
JUPITER, FL 33458 US

**New Mailing Address:**

FEI Number: 59-1141608      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LAWSON, RUTH S  
1747 37TH ST  
WEST PALM BEACH, FL 33407 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: MD ( ) Delete  
Name: LAWSON, RUTH S  
Address: 1747-37TH STREET  
City-St-Zip: JUPITER, FL 33458 US

Title: SD ( ) Delete  
Name: MAGROGAN, PATRICIA  
Address: 12 WEST RIVERSIDE DRIVE  
City-St-Zip: TEQUESTA, FL 33469 US

Title: TD ( ) Delete  
Name: BOYHAN, TOM  
Address: 342 TONEY PENNA DRIVE  
City-St-Zip: JUPITER, FL 33458 US

Title: PD ( ) Delete  
Name: LEAVITT, BETTY  
Address: 10120 CAOBA STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: CD ( ) Delete  
Name: MAGROGAN, WILLIAM  
Address: 12 WEST RIVERSIDE DRIVE  
City-St-Zip: TEQUESTA, FL 33469 US

Title: VPD ( ) Delete  
Name: MARTI, MIGUEL  
Address: 110 NORFOLK ROAD  
City-St-Zip: TEQUESTA, FL 33469 US

**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  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 Chapter 119, 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: RUTH S. LAWSON

MD

01/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date