## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 721905

(8)

ST. PETER CLAVER DAY CARE CENTER, INC.

Principal Place of Business

Mailing Address

1431 TAMPA PARK PLAZA

1431 TAMPA PARK PLAZA

## **FILED** May 07 1997 8:00am Secretary of State

Sulte, Apt. #, etc.    Sulte, Apt. #, etc.   27	TAMPA FL 3360	5-4821		TAMPA FL 33605-4821									
Sulto, Apt. #, etc.    Sulto, Apt. #, etc.									3. Date Incorporated or Qualified 10/19/1971	3a. Date of Last Report 05/01/1996			
Sufe, Apt #, etc.    Sufe, Apt #, etc.   Suite, Apt #, etc.	2. Principal Pl	ace of Busin	ness	2a. Mailing Address					4. FEI Number		Ap	plied For	
City & State    City & State	21								59-1361957		No	t Applicable	
City & State   City		#, etc.		<del> </del>					5. Certificate of Status Desired	$\mathbf{x}$			
Trust Fund Contribution	22										Fee Re	equired	
2   Country   2   P   Country   2   P   Country   8. This corporation has liability for imanapible lax unders \$. 199.032, a   Point of Statutes	City & State								, , ,	L-1			
Age	23		Country						<del> </del>				
9. Name and Address of Courrent Registered Agent  WITHERS, VERONICA 1431 TAMPA PARK PLAZA TAMPA FL 33805-1821  84 City FL 85 Zp Code  11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both an interest to State of Image and submits with an advantage of the provisions of Sections 617 0502 and 617 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Jan Hilliam with, and page has only section 1979, which is provided by the obligations of Section 1979, which is provided the obligations of	24	· '		210			Juntiny		1 ' -			. 199.032,	
WITHERS, VERONICA 1431 TAMPA FARK PLAZA TAMPA FL 33605-1821    B1	24			Registered Agent									
14.91 TAMPA FL 33805-1821  18.3  18.4  18.5  18.						81	Name				<u> </u>		
14.91 TAMPA FL 33805-1821  18.3  18.4  18.5  18.	WITHERS VERONICA												
TAMPA FL 33605-1621    B3					82 Street Add			Addre	ss (P.O. Box Number is Not Acceptal	ole)			
11. Pursuent to the provisions of Sections 617,0502 and 617,1508, 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 617,653, Florida Statutes.  12.													
11. Pursuant to the provisions of Sections 617 0502 and 617 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 617 0503, Florida Statutes.  SIGNATURE  Signature type of agent to a familiar with, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  Signature type of a printed name of registered agent agent agent agent to applicable.  PO FFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD	Trwin rv t	_ 00000 (	<b>,</b>								T I		
office or registered agent, to m familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature Sequent tam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature Sequent tam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature speed on primed came of registered agent und tate it epicleatile.  OFFICERS AND DIRECTORS IN 12  ITILE  PD						84	City			FL	85 Zip (	Code	
Signature, lympote or printed name of registered agent and time of impote called in project and in the proje	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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												
DELETE	SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered							e required	d when reinstating)	DATE			
NYAMBO, CALLIST REV  1203 NORTH NEBRASKA AVENUE  1.8 STREET ADDRESS  1.4 CITY-S1-ZPP  TAMPA F.L  1.8 STREET ADDRESS  1.9 LOUISTANA AVENUE  TAMPA F.L  1.8 STREET ADDRESS  1.9 LOUISTANA AVENUE  TAMPA F.L  1.8 STREET ADDRESS  1.8 CITY-S1-ZPP  TAMPA F.L  1.8 STREET ADDRESS  2.8 WATROUS AVENUE  3.8 STREET ADDRESS  2.9 LOTY-S1-ZPP  1.8 STREET ADDRESS  3.9 STREET ADDRESS  4.0 CITY-S1-ZPP  1.8 STREET ADDRESS  4.0 CITY-S1-ZPP  1.8 STREET ADDRESS  4.0 CITY-S1-ZPP  1.8 STREET ADDRESS  3.9 STREET ADDRESS  4.0 CITY-S1-ZPP  1.8 STREET ADDRESS  4.0 CITY-S1-	12.		OFFICERS AND				13.		ADDITIONS/CHANGES TO OFFIC	CERS AND			
STREET ADDRESS  1203 NORTH NEBRASKA AVENUE  CITY-ST-ZIP  TAMPA FL  13 STREET ADDRESS 14 CITY-ST-ZIP  TAMPA FL  14 CITY-ST-ZIP  TAMPA FL  13 STREET ADDRESS 14 CITY-ST-ZIP  TAMPA FL  21 TITLE  STD  HASKINS, MARY SISTER 24862 US HWY 19 N 3602 22 STREET ADDRESS 24862 US HWY 19 N 3602 24 ACITY-ST-ZIP  TITLE  MD  WITHERS, VERONICA 32 MAME STREET ADDRESS 2528 WATROUS AVENUE 33 STREET ADDRESS CITY-ST-ZIP  TITLE  D  Change Addition  BUCKLEY, FREDERICK REV 3902 TUDOR CT #182 53 STREET ADDRESS CITY-ST-ZIP  TAMPA FL 33614  D  DELETE 51 TITLE  D  Change Addition	TITLE	· ·		☐ DELETE		1.4 TITLE		D			☐ Change	X Addition	
TAMPA FL  STD  DELETE  2 + TITLE  STD  HASKINS, MARY SISTER  2 + MARE  3 + MARE  3 + MARE  3 + MARE  3 + MARE  4 + MARE  4 + MARE  4 + MARE  4 + MARE  5 + MARE  6 +	NAME					1.2 NAME		JA	CKSON, MOZELLA				
TITLE NAME HASKINS, MARY SISTER 22 NAME STREET ADDRESS 24862 US HWY 19 N 3602 CLEARWATER FL 34623 CITY-ST-ZIP TITLE MD NAME WITHERS, VERONICA STREET ADDRESS CITY-ST-ZIP TAMPA FL TITLE D CASEY, PATRICIA 15509 FURLONG CIRCLE TITLE VD STREET ADDRESS CITY-ST-ZIP TITLE VD DELETE 151TILE VD DELETE 151TILE VD DELETE 51TITLE VD DELETE 51TITLE D Change Addition Addition Addition Addition Addition Change Addition	STREET ADDRESS		NUE	1.8 STREE		ADDRESS	1 '						
MAME	CITY-ST-ZIP		<u> </u>						MPA/ FL 33610				
24882 US HWY 19 N 3602   23 STREET ADDRESS   24 CHY-ST-ZIP	TITLE			L DELETE	- 1						∐ Change	☐ Addition	
CITY-ST-ZIP	NAME				2.2 N		2.2 NAME						
TITLE MD	STREET ADDRESS	_			2.3 \$		2.3 STREET ADDRESS						
NAME  WITHERS, VERONICA  2528 WATROUS AVENUE  TAMPA FL  DELETE  4.1 TITLE  CASEY, PATRICIA  4.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VD  DELETE  4.4 CITY-ST-ZIP  TITLE  VD  DELETE  4.5 TITLE  DELETE  5.5 TITLE  DELETE  5.5 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.5 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.5 TITLE  DELETE  6.5 TITLE  DAMME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DAMME  GARCIA, RIGOBERTO SR.  12608 STILLWATER TERRACE DRIVE  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.5 STREET ADDRESS  CARROLLWOOD FL  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  CARROLLWOOD FL  CHANGE  CARROLLWOOD FL  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  CARROLLWOOD FL	CITY-ST-ZIP		ATER FL 34623		_			<del> </del>			П.	77	
STREET ADDRESS  2528 WATROUS AVENUE  TAMPA FL  3.4 CITY-ST-ZIP  TITLE  D  CASEY, PATRICIA  4.2 NAME  STREET ADDRESS  TOTY-ST-ZIP  TITLE  VD  LDELETE  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  VD  LDELETE  5.1 TITLE  DELETE  5.2 NAME  STREET ADDRESS  STREET ADDRESS  GITY-ST-ZIP  TITLE  D  LDELETE  5.1 TITLE  D  Change  Addition  Addition  STREET ADDRESS  GITY-ST-ZIP  TAMPA FL 33614  5.4 CITY-ST-ZIP  TAMPA FL 33614  5.4 CITY-ST-ZIP  TAMPA FL 33614  5.5 CITY-ST-ZIP  TAMPA GARCIA, RIGOBERTO SR.  STREET ADDRESS  CHY-ST-ZIP  CARROLLWOOD FL  6.9 STREET ADDRESS  CHY-ST-ZIP  CARROLLWOOD FL  6.4 CITY-ST-ZIP  CARROLLWOOD FL  6.4 CITY-ST-ZIP  CARROLLWOOD FL  Change  Addition				☐ DETEIE							☐ Change	L_I Addition	
TAMPA FL  TITLE  D  CASEY, PATRICIA  STREET ADDRESS  TISSOP FURLONG CIRCLE  CITY-ST-ZIP  ODESSA FL  ODELETE  4.1 TITLE  VD  DELETE  5.1 TITLE  BUCKLEY, FREDERICK REV  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  3.4 CITY-ST-ZIP  DELETE  5.1 TITLE  D  CHANGE  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  3.6 CITY-ST-ZIP  CHANGE  CITY-ST-ZIP  TAMPA FL  CHANGE  Addition  Change  CHY-ST-ZIP  TAMPA FL  CHANGE  CHY-ST-ZIP  CHANGE  CARROLLWOOD FL  CARROLLWOOD FL  CARROLLWOOD FL  CHANGE  CARROLLWOOD FL  CHANGE  ACTY-ST-ZIP  CARROLLWOOD FL	: .	· · · · · · · · · · · · · · · · · · ·										ļ	
TITLE D DELETE 4.1 TITLE	1												
NAME CASEY, PATRICIA STREET ADDRESS 15509 FURLONG CIRCLE ODESSA FL  VD DELETE 51 TITLE VD Change Addition  BUCKLEY, FREDERICK REV STREET ADDRESS CITY-ST-ZIP  TAMPA FL 33614  DELETE 61 TITLE D Change Addition			<u></u>	I priette	_		S1 - ZIP	<b>↓</b>			<u>Поч-н</u>	Addition	
STREET ADDRESS CITY-ST-ZIP ODESSA FL  VD NAME BUCKLEY, FREDERICK REV STREET ADDRESS CITY-ST-ZIP TITLE  NAME BUCKLEY, FREDERICK REV STREET ADDRESS CITY-ST-ZIP TAMPA FL 33614  DELETE CITY-ST-ZIP  D DELETE 61 TITLE D Change Addition Change CARROLLWOOD FL  CARROLLWOOD FL  CARROLLWOOD FL  CARROLLWOOD FL  CARROLLWOOD FL  COMME CARROLLWOOD FL  CARROLLWOO		•	DATRICIA	C) DEFEIF	•						Change	Addition	
CITY-ST-ZIP ODESSA FL  VD												ŀ	
TITLE VD DELETE 5.1 TITLE DUCKLEY, FREDERICK REV 5.2 NAME  STREET ADDRESS CITY-ST-ZIP  TAMPA FL 33614 5.4 CITY-ST-ZIP  TITLE D D DELETE 6.1 TITLE DELETE 6.2 NAME  STREET ADDRESS GRACIA, RIGOBERTO SR. 6.2 NAME  STREET ADDRESS CITY-ST-ZIP  CARROLLWOOD FL 6.3 STREET ADDRESS CITY-ST-ZIP  CARROLLWOOD FL 6.4 CITY-ST-ZIP													
NAME  BUCKLEY, FREDERICK REV  3902 TUDOR CT			\ <b>FL</b>	Driete	_		ST - ZIP	<b>├</b> ──			Channa	Addition	
STREET ADDRESS   3902 TUDOR CT #182   5.3 STREET ADDRESS	1	, -	V EDEDERION DEV	L. J OELE IE	- 1			1			□ Change	AOUIIIIII	
CITY-ST-ZIP TAMPA FL 33614 5.4 CITY-ST-ZIP  TITLE D DELETE 61 TITLE  GARCIA, RIGOBERTO SR.  STREET ADDRESS CITY-ST-ZIP  CARROLLWOOD FL  5.4 CITY-ST-ZIP  6.3 STREEI ADDRESS CHY-ST-ZIP  6.4 CITY-ST-ZIP	1		•										
TITLE D Change Addition  GARCIA, RIGOBERTO SR.  STREET ADDRESS CITY-ST-ZIP  CARROLLWOOD FL  Change Addition  62 NAME  63 STREET ADDRESS CARROLLWOOD FL  64 CITY-ST-ZIP													
NAME STREET ADDRESS CITY-ST-ZIP  GARCIA, RIGOBERTO SR. 62 NAME 63 STREET ADDRESS CARROLLWOOD FL 64 CITY-ST-ZIP			rl 33014	Theiere		· · · · · · · · · · · · · · · · · · ·	SI - ZIP	+-			Channe	Addition	
STREET ADDRESS 12608 STILLWATER TERRACE DRIVE 6.3 STREET ADDRESS CHY-ST-ZIP 6.4 CITY-ST-ZIP		•	DICOREDTO CD	F""I DETELE								וומוווטווע ב	
CITY-ST-ZIP CARROLLWOOD FL 64 CITY-ST-ZIP				DOME									
				UNIVE									
16. Log defect deally that the information supplied with this filled does not quality for the exemption stated in Section 119 07/3101. Florida Statistics, I further certify that the				with this filing does not gue				L stated	in Section 119 07(3)(i) Florida Statute	s 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

(813) 223-7098