

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 21 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 723653

(2)

1. Corporation Name

EARLY CHILDHOOD SERVICES, INC.

Principal Place of Business

**450 JENKS AVE.
PANAMA CITY FL 32401**

Mailing Address

**450 JENKS AVE.
PANAMA CITY FL 32401**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/13/1972

3a. Date of Last Report

03/07/1994

4. FBI Number

59-1376048

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**PHYLLIS K. KALIFEH
1512 SANTA ANITA DRIVE
LYNN HAVEN FL 32444**

10. Name and Address of New Registered Agent

81 Name

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

83

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	LAPENSOHN, CAROLE
STREET ADDRESS	5230 W HWY 98
CITY-ST-ZIP	PANAMA CITY FL
TITLE	V
NAME	ACTON, DR. MILTON
STREET ADDRESS	1606 LINDENWOOD DR
CITY-ST-ZIP	PANAMA CITY FL
TITLE	S
NAME	GOODMAN, ANITA
STREET ADDRESS	819 E 11 ST
CITY-ST-ZIP	PANAMA CITY FL
TITLE	D
NAME	BALBONI, PAT
STREET ADDRESS	300 S. FIFTH ST.
CITY-ST-ZIP	CHIPLEY FL
TITLE	D
NAME	WELCH, THOMAS F
STREET ADDRESS	300 E 4TH ST
CITY-ST-ZIP	PANAMA CITY FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

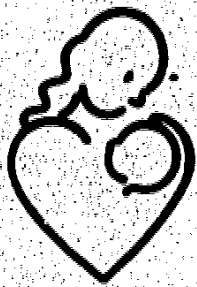
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	Dr. Milton Acton	
1.3 STREET ADDRESS	1606 Lindenwood Drive	
1.4 CITY-ST-ZIP	Panama City, FL 32405	
2.1 TITLE	V	☒ Change ☐ Addition
2.2 NAME	Jeannette Chapman	
2.3 STREET ADDRESS	3412 Robinson Bayou Circle	
2.4 CITY-ST-ZIP	Panama City, FL 32405	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	T	☐ Change ☒ Addition
4.2 NAME	Don Henzlik	
4.3 STREET ADDRESS	1602 New Hampshire Avenue	
4.4 CITY-ST-ZIP	Lynn Haven, FL 32444	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	☒ Change ☐ Addition
6.2 NAME	Carole Lapensohn	
6.3 STREET ADDRESS	5230 W. Hwy. 98	
6.4 CITY-ST-ZIP	Panama City, FL 32401	

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)(b), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Milton Acton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 19, 1995 (904) 785-4995
Date Signature



**Early
Childhood
Services, Inc.**
"Educating with Love"

723653

01/15/1993

HEAD START PROGRAM ■ SUBSIDIZED CHILD CARE
PARENT & CAREGIVER TRAINING ■ CHILD CARE RESOURCE & REFERRAL

ADDITIONAL EARLY CHILDHOOD SERVICES DIRECTORS

Dr. Rory Bedford
3016 Lawton Court
Panama City, FL 32405

Pat Clemons
1005 Buena Vista Blvd.
Panama City, FL 32401

Jimmy Hughes
1012 Goose Bayou Rd.
Lynn Haven, FL 32444

Lynn Keen
2997 Russ Street
Marianna, FL 32446

Clinton Mayo
2916 Fairmont Drive
Panama City, FL 32405

Lurina Tibbs
527 Elm Avenue
Panama City, FL 32401



United Way



Funded by United Way of Bay County and through an arrangement with the Department of Health and Rehabilitative Services

450 Jenks Avenue □ Panama City, Florida 32401 □ (904) 872-7550 □ FAX (904) 769-1066