

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727488

FILED
Apr 28, 2012
Secretary of State

Entity Name: UM/CANTERBURY CHILD CARE CENTER, INC.

Current Principal Place of Business:

1150 STANFORD DR
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

1150 STANFORD DR
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 59-1489157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAMPINO, MARIA G
1150 STANFORD DRIVE
CORAL GABLES, FL 33146 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: P
Name: STAMPINO, MARIA G
Address: 1150 STANFORD DRIVE
City-St-Zip: CORAL GABLES, FL 33146 US

Title: V
Name: HENDERSON, HEATHER
Address: 1150 STANFORD DR
City-St-Zip: CORAL GABLES, FL 33146 US

Title: T
Name: DIAZ, MARLENA
Address: 1320 S DIXIE HWY, #150M
City-St-Zip: CORAL GABLES, FL 33146 US

Title: S
Name: FLOREZ, CRISTINA
Address: 1150 STANFORD DRIVE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR
Name: OWENS, VALERIE
Address: 1400 NW 10TH AVE
City-St-Zip: MIAMI, FL 33136 US

Title: MGR
Name: HARLEY, ALISON
Address: 1150 STANFORD DRIVE
City-St-Zip: CORAL GABLES, FL 33146 US

I hereby 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 all other like empowered.

SIGNATURE: MARIA GALLI STAMPINO

P

04/28/2012

Electronic Signature of Signing Officer or Director

Date