

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743227

FILED
Jan 14, 2009
Secretary of State

Entity Name: NORTH MIAMI EARLY CHILDHOOD SCHOOL AND DAY CARE CENTER, INC.

Current Principal Place of Business:

1200 N.E. 135TH. STREET
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

1200 N.E. 135TH. STREET
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 59-1896602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELDMAN, JUDITH W
1200 N.E. 135TH ST.
NORTH MIAMI, FL 33161 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 () Delete
Name: FELDMAN, JUDITH W
Address: 13085 ORTEGA LANE
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: V () Delete
Name: IBOYI, PATRICIA
Address: 660 NW 177 STREET #244
City-St-Zip: MIAMI, FL 33169

Title: T () Delete
Name: HELENE, CAROL
Address: 431 NW 146 STREET
City-St-Zip: NORTH MIAMI, FL 33168

Title: S () Delete
Name: PINKNEY-COX, YVONNE
Address: 17521 NE 1 COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: MARCOU, ALICE
Address: 13455 NE 10 AVE #408
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Delete
Name: GAMBREL, IVAN
Address: 921 NE 142 STREET
City-St-Zip: NORTH MIAMI, FL 33161

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: D (X) Change () Addition
Name: GAMBREL, IVAN
Address: 480 NE 128 ST
City-St-Zip: NORTH MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify 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: PENNY SEABERG

D

01/14/2009

Electronic Signature of Signing Officer or Director

Date