

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743227

**FILED**  
**Feb 28, 2011**  
**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  
Name: FELDMAN, JUDITH W  
Address: 13085 ORTEGA LANE  
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: V  
Name: SANDERS, PENNY  
Address: 16233 NE 9 PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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

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

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

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: JUDITH FELDMAN

PRES

02/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date