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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 759828

(7)

CENTERVILLA KINDERGARTEN, AND GRADE SCHOOL, INC.

Substance Subs										
## Applied for Country 2	Principal Place of Business Mailing Address								1811 816 11 8 287	
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Suite, April, vio. 2 Suite 2 2 2 2 2 2 2 2 2	2. Principal Pl 21	lace of Business	⊢ ¬	<u>├</u>					├ ─┼	
28	Suite, Apt.	#, etc.	<u> </u>				5. Certificate of Status Desired		\$8.75	5 Additional
20	City & State		<u> </u>							
10. Name and Address of New Registered Agent COPELAND, RUTH E 960 NW 50TH STREET MIAMIF L 10	Zip 24	25 29 30		-	intry	-	8. This corporation has liability for i		tax under s.	
COPELAND, RUTH E 960 NW 50TH STREET MIAMI FL 88 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, this above named corporation's submist this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's bloard of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the displacine of, Sociolo 617,0503, Plands Statutes SIGNATURE SIGNATURE SIGNATURE PTD	Name and Address of Current Registered Agent					· · · · · · · · · · · · · · · · · · ·				
960 NW 50TH STREET MIAMI FL Salage City					81	Name				
SIGNATURE PTD						Street Addr	ress (P.O. Box Number is Not Acceptab	(c)		
11. Pursuant to the provisions of Sactions 617,0502 and 617,1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I thereby accept the appointment as registered agent. I am formally with, and accept the obligations of, Sciotin 617,0508, Florida Statutes. SIGNATURE Signature fixes or private rank of ring strend agent and the frameworks. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 20. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 21. TITLE 22. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 23. SIREET ADDRESS 0. 24. CHY-ST-ZP 10. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12. 24. CHY-ST-ZP 10. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 10. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 10. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 11. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 14. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 15. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 16. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11. 16. ADDITIO					83					
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11. Pursuant to the provisions of Sections 617,0502 and 617,1509, Florida Statutes, tho above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Planda, Such change was submits the source of directors. I hereby accept the appointment as registered agent. I am such accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS in 12. THE PTD Change Addition NAME COPELAND, RUTH E 12 NAME 1.3 STREET ADDRESS MIAMIFE 1.3 STREET ADDRESS MIAMIFE 1.4 CHY-ST-ZIP 1.5 CHANGES STREET ADDRESS MIAMIFE 1.5 CHANGES STREET ADDRESS MIAMIFE 1.5 CHANGE STREET ADDRESS MIAMIFE 1.5 CHANGES STREET ADDRESS MIAMIFE 1.5 CHANGE S						•		FI	_ '	
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TILLE PTD DELETE 13		Signature, based or printed pages of majetaree	d good and tile if genicable	Nr. Davids						
TILLE PTD					Media	algriature recjoirac			O DIDECTO	1DS IN 12
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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)(k), 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 of 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 Btock 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTE NAME OF SIGNING OFFICER OR DIRECTOR