

F1400000/602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

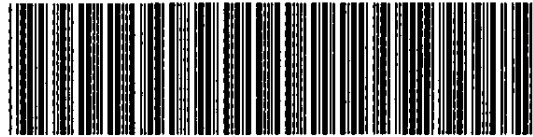
(Document Number)

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Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
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4/11/14

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** HighScope Educational Research Foundation, Inc.  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Theresa Schenk

Name of Person

HighScope Educational Research Foundation, Inc.

Firm/Company

600 North River Street

Address

Ypsilanti, MI 48198

City/State and Zip Code

tschenk@highscope.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Schenk

Name of Person

at ( 800 ) 587-5639 ext. 229

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:*

1. HighScope Educational Research Foundation, Inc.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. State of Michigan 3. 237001501  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 29, 1968 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. HighScope has done business in Florida in the past, and was registered during that time.  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 600 North River Street, Ypsilanti, MI 48198  
(Principal office address)
- \_\_\_\_\_  
(Current mailing address)

8. To receive funds for training for educational purposes, distribution of educational materials, and dissemination of information.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

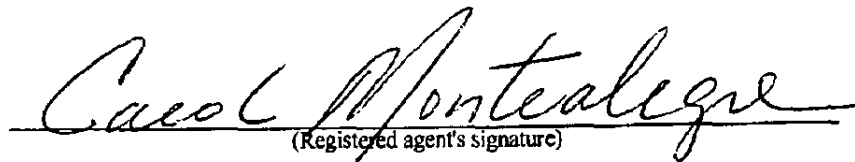
Name: Carol C. Montealegre

Office Address: 1322 Castile Avenue

Coral Gables, Florida 33134  
(City) (Zip Code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: Marianne Udow-Phillips  
Address: Director Center for Healthcare, Research and Transformation  
2929 Plymouth Road, Suite 245, Ann Arbor, MI 48105

Vice Chairman: Sue Bredekamp  
Address: Early Childhood Education Consultant & Author  
2608 Crest Avenue, Cheverly, MD 20785

Director: Michael L. Lopez  
Address: ABT Associates,  
4550 Montgomery Avenue, Suite 800 North, Bethesda, MD 20814-3343

Director: Jana Martella  
Address: Center on Enhancing Early Learning Outcomes  
1025 Thomas Jefferson Street, NW Suite 700, Washington, DC 20007

**B. OFFICERS**


President: Cheryl Polk  
Address: HighScope Educational Research Foundation, Inc.  
600 North River Street, Ypsilanti, MI 48198

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

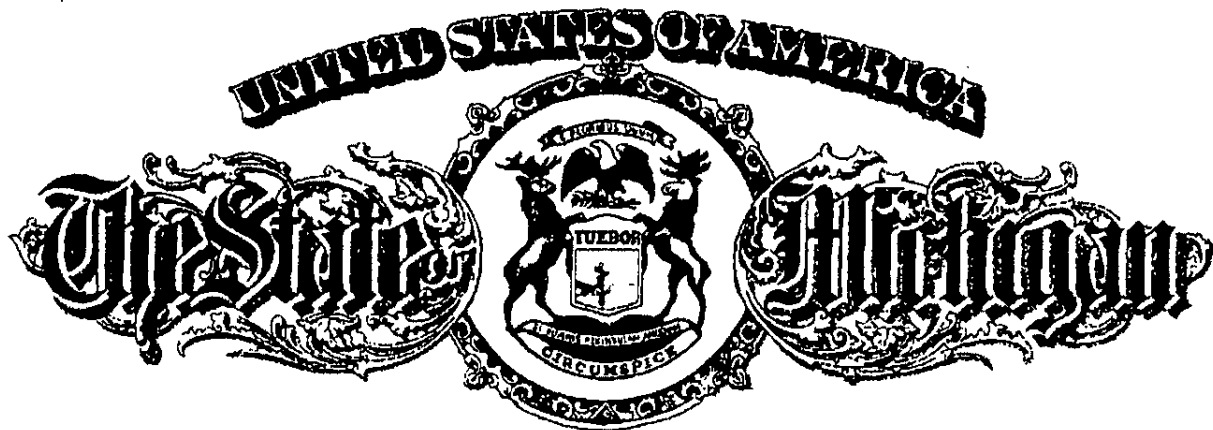
Secretary: Marge Yahrmatter  
Address: 600 North River Street, Ypsilanti, MI 48198

Treasurer: Theresa Schenk  
Address: 600 North River Street, Ypsilanti, MI 48198

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. President  
(Typed or printed name and capacity of person signing application)



**Department of Licensing and Regulatory Affairs**  
**Lansing, Michigan**

*This is to Certify That*

**HIGH SCOPE EDUCATIONAL RESEARCH FOUNDATION**

*was validly incorporated on July 29, 1968, as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1982 PA 162, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*



Sent by Facsimile Transmission  
1193749

*In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 12th day of February, 2014.*

Alan J. Schefke, Director  
Corporations, Securities & Commercial Licensing Bureau