FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F63385

(1)

MEADOWBROOK COUNTRY DAY SCHOOL, INC.

Principal Place of Business Mailing Address C/O BLANCHE MCGOWAN C/O BLANCHE MCGOWAN 4440 S.W. 21ST STREET FT. LAUDERDALE FL 33317 4440 S.W. 21ST STREET FT. LAUDERDALE FL 33317-5723 3. Date Incorporated or Qualified 36. Date of Last Report 01/15/1982 04/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2182054 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 🗶 Yes 🔲 No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DANIEL WADE 4480 NW 18 TERR 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33309 83 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) DELETE Change Addition TITLE 1.1 1016 MCGOWAN, BLANCHE NAME 1.2 NAME 4440 SW 21ST ST STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.4 111LE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 City - St - ZiP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP ☐ Change DELETE TITLE 4.1 TITLE Addition NAME , 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TO LE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY - \$1 - 7IP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 logal 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

☐ Change

Addition

FILED

Apr 25 1997 8:00am

Secretary of State