## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999

**DOCUMENT #** 



L57891

LOXAHATCHEE COUNTRY PRESCHOOL(S), INC.

## FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jul 14, 1999 8:00 am Secretary of State Katherine Harris

07-14-1999 90006 011 \*\*\*150.00

Principal Plac	e of Business	Mailing Address	١.	r i batisti een anni raddi i biid ikini nar aran bibli didir diasi aran aran tara
		C/O HILDA K. MOSES	1	•
C/O HILDA K 16245 PRESTI		16245 PRESTWICH DR. E.		
LOXAHATCHEE FL 33470 LOXAHATCHEE FL 3347				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				03/15/1990
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0189471 Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22	<u>-</u>	27		5. Certificate of Status Desired Fee Required
City & Star	te	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Žip	Country	Zip	Country	8. This corporation owes the current year 15 PAID
24	25	29 3	o	Intangible Personal Property. Yes VNo
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
1	AFA 188 B4 17	CHLICE OF ANDRE	ESS  81  N	Name NEW ADDRESS GIVEN AS ITEM # 1 ABOU
MOSES, HILDAK CHANGE OF ADDRESS			1949 82 S	Street Address (P.O. Box Number is Not Acceptable)
16245 OKEECHOBEE ROAD WAS FILED AUG 19,199			1798 3- 3	16245 PRESTWICH DRE.
l ro	XAHATCHEE FL 33470	71 5:30 pm.	83	<del></del>
	,	NO NOTICE WAS, MAILED	70	LOXAHATCHEE, FLA 33470
		NO NOTICE WAS MAILED NEW ADDRESS NOR FORWA	18000 84 C	City B5 Zip Code
11 Pursuan	t to the provisions of costions 607 050	2 and 607 1509 Florida Statutes	the shove nor	med 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 aut	horized by the	e corporation's board of directors. I hereby accept the appointment as registered
agent. i	am familiar with, and accept the oblig	ations of, section 607.0505, Florid	da Statutes.	
SIGNATURE	Signature, typed or printed name of registered ages	at and title if englicable (NOTE	Registered Agent	t signature required when reinstating) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE	Change Addition
NAME	MOSES, HILDA K	L. Deceie	1.2 NAME	Unaligo Es Adollion
}	16245 PRESTWICH DR. E.		1.3 STREET ADD	nates
STREET ADDRESS	LOXAHATCHEE FL 33470			
CITY-ST-ZIP	DT		1.4 CITY-ST-ZIP	
TITLE	<del>"</del> '	DELETE	2.1 TITLE	Change Addition
NAME	MOSES, PAUL W		2.2 NAME	
STREET ADDRESS	16245 OKEECHOBEE RD		2.3 STREET ADD	
CITY-ST-ZIP	-LOXAHATCHEE FL		2.4 CITY-ST-ZIP	
TITLE	V	DELETE	3.1 TITLE	Change Addition
NAME	MOSES, ROBERT A.		3.2 NAME	· ·
STREET ADDRESS	811 N. BROAD ST.		3.3 STREET ADD	DRESS
CITY-ST-ZIP	LANSDALE PA		3.4 CITY-ST-ZIP	<u> </u>
TITLE		DELETE	4.1 TITLE	Change Addition
NAME	Į		4.2 NAME	
STREET ADDRESS		-	4.3 STREET ADD	DRESS

14. I 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-Z!P TITLE

CITY-ST-ZiP

CITY-ST-ZIP

STREET ADDRESS

NAME STREET ADDRESS

TITLE

NAME

SPAUL Mises REQUIRE

DELETE

DELETE

(561) 798-9083

Change Addition

Addition



## LOXAHATCHEE COUNTRY PRESCHOOL, INC.

HILDA K. MOSES

16245 Prestwich Drive, E.
Loxahatchee, Florida - 33470

587783-9000 6-1/

L57891

JULY 6, 1999

Dear Sirs:

We phoned your office at 9:08 A.M. on this day, and reported why your 2nd notice for our Annual Corporate Report came to us only on Friday, July 2nd,1999; and was the first notice we ever received. We write this letter with the completed report and our check in the amount of \$150.00 in response to a recommendation from your office that we do so.

Please note that in block 9 of the enclosed report that your department listed our old address. Apparently when you mailed the first notice, it was sent to the old address. We also enclose copies of our ammendments which indicate that our new address was filed in your office on Aug. 19,1998. It seems that our new address was not moved along in your file data.

Thus: your first notice never reached us for reasons we do not know. The person on the phone today noted that we were at all times very prompt in responding and reporting annually.

We therefore most respectfully request that you please accept our above check for \$150.00; and please mark us as being in compliance with your instructions. Surely, it was not due to negligence that the first report was not sent; but rather a crossing of the mail or some reason why the first notice was never received.

Sincerely, Silbalemores

HILDA K. MOSES, pres.