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

PROFIT
CORPORATION
ANNUAL REPORT

1997

STREET ADDRESS
COTY - STE-ZIP

STREET ADDRESS

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STREET ADDRESS

City St-2#

OID: \$1-20

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L86332**

(8)

BEULAH BLACK'S CHILD DEVELOPMENTAL LEARNING CENT ER, INC. Beulah's Pre-K and Learning Center, Inc.

WC12/23 Principal Place of Business Mailing Address C/O BEULAH BLACK C/O BEULAH BLACK 1505 WEST AVERY STREET 1505 WEST AVERY STREET PENSACOLA FL 32501 PENSACOLA FL 32501-1807 3a. Date of Last Report 3. Date incorporated or Qualified 03/19/1996 07/06/1990 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3016822 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Aprt. #, e3c 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zio Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 25 30 Florida Statutes Yes No 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BLACK, BEULAH **612 WEST MORENO STREET** 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32501 83 Zip Code 85 Pursuant to the provisions of Sections 697,0502 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Source imports a print of mateur of regularizational agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. n DELETE Change Addition 1.1 TITLE 10 E BLACK, WANDA NAME 1.2 NAME 1505 WEST AVERY ST. 1.3 STREET ADDRESS STREET ALCORESS PENSACOLA FL 1.4 CITY-ST-ZIP OTY S1-ZP DELETE Change Addition 2.1 TITLE TIFLE BLACK, BEULAH **2.2 NAME** 1505 WEST AVERY ST. 23 STREET ADDRESS STREET ADDRESS PENSACOLA FL 2 4 CHY-ST-ZIP CHY SI-70 Addition DELETE Change 1 11.6 3.1 TITLE 1 3.2 NAME NAME

64 CITY-ST-ZIP

14. If do hereby carlify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify has the information indicated on this annual report is fue 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.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.4 CITY - ST - ZIF

3.4. CITY - ST - ZIP

4.1 TITLE 4.2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE

62 NAME 63 STREET ADDRESS

DELETE

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SIGNATURE: SEY JAH BLACK

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3-20-97 (404) 435-6

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Apr 01 1997 8:00am

Secretary of State

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