

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 18, 2003 8:00 am
Secretary of State

08-18-2003 90160 039 *****70.00

DOCUMENT # N00000001665

1. Entity Name

**LAKE WORTH CHRISTIAN CHILD DEVELOPMENT CENTER,
NC.**



Principal Place of Business

**7592 HIGH RIDGE ROAD
LANTANA FL 33462**

Mailing Address

**7592 HIGH RIDGE ROAD
LANTANA FL 33462**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HARRIS, J. RICHARD
4400 PGA BLVD., SUITE 800
PALM BEACH GARDENS FL 33410**

7. Name and Address of New Registered Agent

Name

LEONARD STOB

Street Address (P.O. Box Number is Not Acceptable)

7592 HIGH RIDGE ROAD

Lantana

City

Lantana

FL

Zip Code

33426

8. The above-named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7-12-03

DATE

FILE NOW: FEE IS \$61.25

After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution, ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **LIN, DAVID**
STREET ADDRESS **7592 HIGH RIDGE ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

TITLE **D** ☐ Delete
NAME **STOB, LEONARD**
STREET ADDRESS **7592 HIGH RIDGE ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

TITLE **D** ☒ Delete
NAME **HARRIS, J. RICHARD**
STREET ADDRESS **7592 HIGH RIDGE ROAD**
CITY-ST-ZIP **LANTANA FL 33462**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

7-11-03

(56)586-8216

CR2E037 (4/03)