

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002431

FILED
Feb 23, 2009
Secretary of State

Entity Name: EARLY LEARNING COALITION OF MIAMI-DADE/MONROE, INC.

Current Principal Place of Business:

2555 PONCE DE LEON BLVD
SUITE 500
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2555 PONCE DE LEON BLVD
SUITE 500
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-1122406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRINO, ANGELO
2555 PONCE DE LEON BLVD. #500
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: VERDEJA, OCTAVIO A JR
Address: 201 ALHAMBRA CIRCLE, SUITE 901
City-St-Zip: MIAMI, FL

Title: VC () Delete
Name: JOHNSON, YVONNE T
Address: 3370 POINCIANA AVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: T () Delete
Name: PERKINS, YESENIA
Address: 811 VENETIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: S () Delete
Name: SCHWARTZ, GERALD K
Address: 1111 LINCOLN RD, 4TH FL
City-St-Zip: CORAL GABLES, FL 33134

Title: PCEO () Delete
Name: TORRES, EVELIO C
Address: 2555 PONCE DE LEON BLVD #500
City-St-Zip: CORAL GABLES, FL 33144

Title: SDA () Delete
Name: PARRINO, ANGELO
Address: 255 PONCE DE LEON BLVD #500
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELO PARRINO

SDA

02/23/2009

Electronic Signature of Signing Officer or Director

Date