

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NO1000000721

1. Entity Name

THE TREE OF LIFE DEVELOPMENTAL CENTER INC.

FILED

May 02, 2002 8:00 am
Secretary of State

05-02-2002 90084 035 ****62.00

Principal Place of Business

Mailing Address

820 NW 122 ST
N MIAMI FL 33168

820 NW 122 ST
N MIAMI FL 33168

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

37-1420076

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALKER, RAYMOND L
820 NW 122 ST
N MIAMI FL 33168

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT ☐ Delete
NAME RAYMOND L. WALKER
STREET ADDRESS 820 N.W. 122 ST
CITY-ST-ZIP MIAMI, FL 33168

TITLE Board Member ☐ Change ☐ Addition
NAME Barbara Carey
STREET ADDRESS 7520 North Tropicalana ST
CITY-ST-ZIP Hollywood FL 33023

TITLE SECRETARY ☐ Delete
NAME LENA S. WALKER
STREET ADDRESS 820 N.W. 122. ST
CITY-ST-ZIP MIAMI FL 33168

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

TITLE DAVID TATE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE CHAIRMAN ☐ Delete
NAME DAVID TATE
STREET ADDRESS 1331 N.W. 174 ST
CITY-ST-ZIP MIAMI, FL

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

TITLE VICE CHAIRPERSON ☐ Delete
NAME SONJA REESE
STREET ADDRESS 19001 N.W. 27 AVE
CITY-ST-ZIP MIAMI FL 33056

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

TITLE BOARD MEMBER ☐ Delete
NAME SIDNEY WILSON JR.
STREET ADDRESS 1350 NE 114 ST
CITY-ST-ZIP N. MIAMI, FL 33161

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: Raymond L. Walker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/02

305-688-1082
Date Daytime Phone #

CR2E037 (9/01)