

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 26, 2004 8:00 am**  
**Secretary of State**

02-26-2004 90017 025 \*\*\*\*61.25

DOCUMENT # N01000002429

1. Entity Name  
WESTMINSTER CHRISTIAN SCHOOL FOUNDATION, INC.



Principal Place of Business  
6855 S W 152ND STREET  
MIAMI, FL 33157

Mailing Address  
6855 S W 152ND STREET  
MIAMI, FL 33157

44014227



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02062004 Chg-NP CR2E037 (10/03)

4. FEI Number  
16-1634715

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

JOHNSON, ELIZABETH  
C/O FOWLER, WHITE, BURNETT, ET AL, P.A.  
100 S E 152ND STREET  
MIAMI, FL 33157

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME FRASER, LEWIS  
STREET ADDRESS 6855 SW 152ND ST  
CITY-ST-ZIP MIAMI, FL 33137

TITLE PD ☒ Change ☐ Addition  
NAME Tina Traynor  
STREET ADDRESS 6855 SW 152 ST.  
CITY-ST-ZIP Miami, FL 33157

TITLE VP ☐ Delete  
NAME TRAYNOR, CHRISTINE R  
STREET ADDRESS 6855 SW 152ND ST  
CITY-ST-ZIP MIAMI, FL 33137

TITLE VP ☒ Change ☐ Addition  
NAME Ted Pappas  
STREET ADDRESS 6855 SW 152 St.  
CITY-ST-ZIP Miami, FL 33157

TITLE TD ☐ Delete  
NAME DELANGE, DANIEL  
STREET ADDRESS 6855 SW 152ND ST  
CITY-ST-ZIP MIAMI, FL 33137

TITLE TD ☒ Change ☐ Addition  
NAME Rob Forbes  
STREET ADDRESS 6855 SW 152 St.  
CITY-ST-ZIP Miami, FL 33157

TITLE SD ☐ Delete  
NAME PARKER, AMY  
STREET ADDRESS 6855 SW 152ND ST  
CITY-ST-ZIP MIAMI, FL 33137

TITLE SD ☒ Change ☐ Addition  
NAME Amy Boulris  
STREET ADDRESS 6855 SW 152 St.  
CITY-ST-ZIP Miami, FL 33157

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/21/04

(305) 258-2400  
(305) 253-2030