

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

DOCUMENT # N01000006796

1. Entity Name

St. Mary's Child Development Center, Inc.

FILED

02 AUG 14 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100007428161--8

-08/29/02--01050--023

*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business

5325 Greenwood Avenue

Suite, Apt. #, etc.

Suite 201

City & State

West Palm Beach, FL

Zip

33407

Country

U.S.A.

3. Mailing Address

5325 Greenwood Avenue

Suite, Apt. #, etc.

Suite 201

City & State

West Palm Beach, FL

Zip

33407

Country

U.S.A.

4. FEI Number

30-0002887

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name CT Corporation System

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

1200 S. Pine Island Road

City Plantation

FL

Zip Code
33324

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IN THIS SPACE**

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

FEE IS \$61.25

Initial or Amended UBR

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President and Director
Peter Marmenstein
901 45th Street
West Palm Beach, Florida 33407

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Carl David Ross
500 W. Cypress Creek Road, #370
Ft. Lauderdale, Florida 33309

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Don Steignman
500 W. Cypress Creek Road, #370
Ft. Lauderdale, Florida 33309

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary and Treasurer
Dr. Ted Wasserman
5325 Greenwood Avenue, #201
West Palm Beach, Florida 33407

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address with all other like entities empowered.

SIGNATURE:

TED WASSERMAN

8/12/02

(561) 882 6434

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary and Treasurer

CR2E037B (12/01)