

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006423

FILED
Apr 29, 2008
Secretary of State

Entity Name: BET SHIRA EARLY CHILDHOOD CENTER, P.T.A., INC.

Current Principal Place of Business:

7500 SW 120 STREET
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

7500 SW 120 STREET
MIAMI, FL 33156

New Mailing Address:

FEI Number: 59-2500437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSENHEIMER, JAMES D
3250 MARY STREET
SUITE 307
COCONUT GROVE, FL 33133 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: PD () Delete
Name: SZOMSTEIN, REBECCA
Address: 7453 SW 125 STREET
City-St-Zip: VILLAGE OF PINECREST, FL 33156

Title: VD () Delete
Name: CAIN, MARNI T
Address: 7275 SW 138 STREET
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33158

Title: SD () Delete
Name: FINKLE, DEBORAH
Address: 7330 SW 115 STREET
City-St-Zip: VILLAGE OF PINECREST, FL 33156

Title: TD () Delete
Name: ESQUENAZI, BECKY
Address: 7601 SW 150 TERRACE
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SLEEMAN, JENNIFER B
Address: 5860 SW 119 STREET
City-St-Zip: CORAL GABLES, FL 33156

Title: VD (X) Change () Addition
Name: SHARPE, SAMANTHA S
Address: 8201 SW 149 DRIVE
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33158

Title: SD (X) Change () Addition
Name: JAMES, LISA F
Address: 6721 SW 140 STREET
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33158

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: BECKY ESQUENAZI

TD

04/29/2008

Electronic Signature of Signing Officer or Director

Date