

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006423

FILED  
Apr 30, 2009  
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: SLEEMAN, JENNIFER B  
Address: 5860 SW 119 STREET  
City-St-Zip: CORAL GABLES, FL 33156

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

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

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: VD (X) Change ( ) Addition  
Name: PODVIN, MEREDITH A  
Address: 60 EDGEWATER DRIVE #3A  
City-St-Zip: CORAL GABLES, FL 33133

Title: VD (X) Change ( ) Addition  
Name: VINUEZA, VIRGINIA A  
Address: 15001 SW 76 COURT  
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33158

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

Title: TD (X) Change ( ) Addition  
Name: EHRENREICH, JAIME S  
Address: 6750 SW 141 STREET  
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 33158

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: JAIME S. EHRENREICH

TD

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date