

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007029

FILED
Apr 28, 2004
Secretary of State

Entity Name: TRAC PUBLIC EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

18325 SW 280 STREET
HOMESTEAD, FL 33031

New Principal Place of Business:

7790 SW 144 STREET
PALMETTO BAY, FL 33158

Current Mailing Address:

P.O. BOX 570328
MIAMI, FL 33257

New Mailing Address:

FEI Number: 35-2181621 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, JOHN C ESQ.
2701 PONCE DE LEON BLVD.
SUITE 302
CORAL GABLES, FL 33134 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: D () Delete
Name: DAUGHERTY, DAMARIS P
Address: 18325 SW 280 STREET
City-St-Zip: HOMESTEAD, FL 33031

Title: D () Delete
Name: LINARDI, JOANNE
Address: 8711 SW 185TH TERRACE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: HERRELL, JUDY
Address: 1052 NW 22ND STREET
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DAUGHERTY, DAMARIS P
Address: 7790 SW 144 STREET
City-St-Zip: PALMETTO BAY, FL 33158

Title: D (X) Change () Addition
Name: BRANDE, LUIS
Address: 9825 SW 80 DRIVE
City-St-Zip: MIAMI, FL 33173

Title: D (X) Change () Addition
Name: CARDENAS, WALDO
Address: 14360 SW 90 TERRACE
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAMARIS PEREZ DAUGHERTY

D

04/28/2004

Electronic Signature of Signing Officer or Director

Date