

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000007029

FILED  
Apr 22, 2003  
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:**

**Current Mailing Address:**

18325 SW 280 STREET  
HOMESTEAD, FL 33031

**New Mailing Address:**

P.O. BOX 570328  
MIAMI, FL 33257

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

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

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

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 P DAUGHERTY

D

04/22/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date