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	INDIAN TRACE EDUCATION FOUN	DATION, INC.				
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320 CAC       Is & Forded Statutes       Vis       No         9. Name and Address of Current Registered Agent       10. Name and Address of Now Registered Agent         1130 NW 72ND AVE.       113 Lo D       Image and Address of Now Registered Agent         121 Street Address of Now Registered Agent       10. Name and Address of Now Registered Agent         122 Street Address (P.O. Box Number is Not Acceptable)       113 Lo D       Image Address of Now Registered Agent         123 Leb Control       113 Lo D       Use of Acceptable)       113 Lo D       Image Address of Now Registered Agent         141 Name       113 Lo D       Use of Acceptable)       113 Lo D       Image Address of Now Registered Agent         142 Now Taxto No FL Sastate       113 Lo D       Use of Acceptable)       113 Lo D       Image Address of Now Registered Agent         143 Now Taxto No FL Sastate       113 Lo D       Use of Acceptable)       113 Lo D       Image Address of Now Registered Agent         144 Development with and address of Now Registered Agent       113 Lo D       Image Address of Now Registered Agent       113 Lo D         145 Now Control No No Now Registered Agent       12 Now Control No Now Registered Agent       12 Now Control No Now Registered Agent       12 Now Control No Now Registered Agent         142 Now Control No Now Registered Agent       12 Now Control Now Registered Agent       12 Now Control No Now Regist	Zip Country S	Zip				
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1430 NW 72ND AVE.         PLANTATION FL 33313         Image: Text and the provisions of Sections 617 0509, Pand 617 1509, Forida Statutes, In the corporation's board of directors. I hereby accept the bigatismed approximation submits his laterent for the provisions of Sections 617 0509, Pand 617 1509, Forida Statutes, In the corporation's board of directors. I hereby accept the bigatismed approximation submits his laterent for the provisions of Sections 617 0509, Pand 617 1509, Forida Statutes, In the corporation's board of directors. I hereby accept the bigatismed approximation submits his laterent for the propose of changing is registered approximation submits his laterent for the propose of the bigatismed approximation submits his laterent for the propose of the bigatismed approximation submits his laterent for the propose of the bigatismed approximation submits his laterent for the propose of the bigatismed approximation submits his laterent for the propose of the bigatismed approximation submits his laterent for the propose of the bigatismed approximation and any and approximation of the propose of the bigatismed approximation approximation and any and approximation approximation and any and approximation approximation approximation approximation and any and approximation approximatis approximating approximation approximation approximating approxima	9. Name and Address of Current	Kağıstereb Ağent	81 Name	10, Name and Address of New Hegis	tereci Agent	
PLANTATION FL 33313       Image: Clinic of Cli	•		82 Street A	ddress (P.O. Box Number is Not Acceptable)	<u> </u>	
In       Line August to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-member deportion submits the statement for the purpose of changing its registered office or registered agent, an oblin, in the State of Florida Statutes, and a statutes.       EL       I 3 20 2 L         SIGNATURE			83 113	60 Woyne		
II. Pursuant to the provisions of Stockens 617 C502 and 617 1508. Fordia Statutes, the above-hamed deportation abundls the statement for the purpose of changing its registered agent. I and familiar with, and accept the objected region of boding of the statement for the purpose of changing its registered agent. I and familiar with, and accept the objected region. Or boding of the statement for the purpose of changing its registered agent. I and familiar with, and accept the objected region. Section 617 C503, Florida Statutes.         SGNATURE       I and familiar with, and accept the objected with the statement.       MOTE Representations.       Mote Corporation's board of directors.       Mote Corporation's board of directors.         IRE       PD       OFF/CERS AND DIRECTORS       III.       ADDITIONS/CHANGES TO OFF/CERS AND DIRECTORS IN 12         IRE       PD       OFF/CERS AND DIRECTORS       IIII.       IIII.       IIII.         IRE TADORSS       III.       IIII.       IIII.       IIII.       IIII.         IRE TADORSS       III.       IIII.       IIIII.       IIIII.       IIIII.       IIIII.       IIIII.       IIIII.       IIIII.       IIIIII.       IIIII.       IIIIIII.       IIIIIIII.       II			84 Çity	······································	85 Zip Code	
office of registered agent, or both, in the State of Forca, Such change was sufhorzed by the corporation's board of directors. I hereby accept the appointment as registered agent and manine with, and accept the objections of 25000, Forcal Statutes.         SIGNATURET       OFFICERS AND DIRECTORS       13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.         22.       OFFICERS AND DIRECTORS       13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.         23.       OFFICERS AND DIRECTORS       13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.         10.       HEADLEY, CHARLES       13.       13.       ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12.         13.       Name       13.       13.       Change       Addition         MARE       HEADLEY, CHARLES       13.       13.       Change       Addition         MARE       VD       DELETE       21.       Change       Addition         MARE       CASANOVA, DEBBIE       23.       Stret ADDRSS       13.6.0       U.O., U.O., D.G., Addition         MARE       CASANOVA, DEBBIE       23.       Stret ADDRSS       13.6.0       U.O., U.O., D.G., Addition         MARE       CASANOVA, DEBBIE       23.       Stret ADDRSS       13.6.0       U.O., J.O., D.G., Addition         MARE       CASANOVA, DEBBIE       23.       Stret ADDR	11. Pursuant to the provisions of Sections 617.0502	and 617.1508, Florida Statutes	the above named o	propration submits this statement for the pure	ose of changing its registered	
Syndret: printed pulled pulled and soft approximation       DATE         2.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         Inte       PD       DELETE       11 Title       Drange       Addition         Inte       PD       DELETE       11 Title       Drange       Addition         Inte:       PD       DELETE       12 MWA       Drange       Addition         Inte:       PD       DELETE       21 MWA       Drange       Addition         Inte:       VD       DELETE       21 MWA       Drange       Addition         Inte:       VD       DELETE       21 MWA       Drange       Addition         Inte:       VD       DELETE       21 MWA       Drange       Addition         AME       CASANOVA, DEBBIE       22 MWA       DISTERTADORSS       DISTERTADORSS <td< td=""><td>Office or registered agent, or both, in the State of</td><td>t Florida. Such change was au</td><td>thorized by the corry</td><td>pration's board of directors. I hereby accept it</td><td>ne appointment as registered</td></td<>	Office or registered agent, or both, in the State of	t Florida. Such change was au	thorized by the corry	pration's board of directors. I hereby accept it	ne appointment as registered	
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MAKE       HEADLEY, CHARLES       12 NAWE         TREET ADDRESS       412 NE 3RD AVE       13 STREET ADDRESS         MAKE       CASANOVA, DEBBIE       12 NAWE         MAKE       CASANOVA, DEBBIE       22 NAWE         MAKE       VD       DELETE       21 TITLE         MAKE       LEBEERMAN, STEVAN       32 NAWE         MAKE       LIEBEERMAN, STEVAN       32 NAWE         MAKE       LIEBEERMAN, STEVAN       33 STREET ADDRESS         MAKE       LIEBEERMAN, STEVAN       32 NAWE         MAKE       VALLADERDS, ANA       42 NAWE         MAKE       SD       DELETE       51 TITLE			·	ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 12	
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AME       CASANOVA, DEBBIE       22 NAME         INEET ADDRESS       485 SABAL WAY       23 STREET ADDRESS         INT-S1-2P       FT. LAUDERDALE FL       2.4 (ITY-ST-2P         ILEBERMAN, STEVAN       DELETE       31 TITLE         Axie       LEBERMAN, STEVAN       33 STREET ADDRESS         1430 NW 72ND AVE.       33 STREET ADDRESS       113 & O       U C 1, V C         ITY-ST-2P       PLANTATION FL       34.017Y-ST-2P       C 0 0, V C       D C         ITY-ST-2P       PLANTATION FL       34.017Y-ST-2P       C 0 0, V C       D C         ITY-ST-2P       PLANTATION FL       34.017Y-ST-2P       C 0 0, V C       D C         ITY-ST-2P       PLANTATION FL       34.017Y-ST-2P       C 0 0, V C       D C         ITY-ST-2P       PLANTATION FL       35 STRET ADDRESS       113 & O       U 0, V C       D C         ITY-ST-2P       PLANTATION FL       34.017Y-ST-2P       C 0 0, V C       D C       ITTE         AME       STRET ADDRESS       113 & O       U 0, V C       D C       ITTE       Addition         ITY-ST-2P       FT. LAUDERDALE FL       4.017Y-ST-2P       ITTE       C 0 ange       Addition         ITY-ST-2P       FT. LAUDERDALE FL       0 ELETE       S STRET ADDR					2 2 2	
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Inter ADDRESS       1430 NW 72ND AVE.       33 STRET ADDRESS       113 & O Woywe D K         ITV-ST-ZIP       PLANTATION FL       34 CITV-ST-ZIP       Corpess CITY PL 30 2 & C         ITUE       SD       DELETE       41 TITLE       Change       Addition         AME       VALLADERES, ANA       4.2 NAME       Change       Addition         ITREET ADDRESS       412 NE 3RD AVE       4.3 STREET ADDRESS       Corpess       Addition         ITUE       DELETE       4.1 TITLE       Change       Addition         ITUE       DELETE       4.1 STREET ADDRESS       Addition         ITTET ADDRESS       412 NE 3RD AVE       4.3 STREET ADDRESS       Addition         ITUE       DELETE       5.1 TITLE       Change       Addition         ITUE       STREET ADDRESS       5.3 STREET ADDRESS       STREET ADDRESS       ITUE       Change       Addition         ITV: ST-ZIP       DELETE       5.1 TITLE       Change       Addition       Street ADDRESS       STREET ADDRESS       ITUE       Change       Addition         ITV: ST-ZIP       DELETE       5.1 TITLE       Change       Addition       Street ADDRESS       ITUE       Itue       Itue       Itue       Itue       Itue       Itue       Itue		DELETE		······································	Change 🛄 Addition	
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VALLADERES, ANA       4.2 NAME         TREET ADDRESS       412 NE 3RD AVE         ITY-SI-2IP       FT. LAUDERDALE FL         ITLE       44 CITY-ST-ZIP         ITLE       DELETE         S1 TITLE       Change         AME       52 NAME         S1 TITLE       Change         AME       53 STREET ADDRESS         ITY-SI-ZIP       54 CITY-ST-ZIP         ITHE       DELETE         S1 STREET ADDRESS       53 STREET ADDRESS         ITY-SI-ZIP       54 CITY-ST-ZIP         ITHE       Change         ITHE       Addition         AME       63 STREET ADDRESS         ITY-SI-ZIP       64 CITY-ST-ZIP         ITHE       Change         AME       63 STREET ADDRESS         ITY-SI-ZIP       64 CITY-ST-ZIP         ITHE ADDRESS       63 STREET ADDRESS         ITY-SI-ZIP       64 CITY-ST-ZIP         4. I do 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 annual report or supplemental annual 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 execure this repor			1			
IREET ADDRESS       412 NE 3RD AVE FT. LAUDERDALE FL       4.3 STREET ADDRESS         ITY-ST-ZIP       4.4 CITY-ST-ZIP         ITLE       Change         AME       5.2 NAME         STREET ADDRESS       5.3 STREET ADDRESS         ITY-ST-ZIP       5.4 CITY-ST-ZIP         ITY-ST-ZIP       6.1 TITLE         ITY-ST-ZIP       ITY-ST-ZIP         ITY-ST-ZIP       5.4 CITY-ST-ZIP         ITY-ST-ZIP       6.1 TITLE         ITY-ST-ZIP       ITY-ST-ZIP         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.4 OITY-ST-ZIP         4. 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and acurate and that my signature shall have the same legal				• •	L Unange L. Addition	
ITLE       DELETE       5.1 TITLE       Change       Addition         AME       5.2 NAME       5.3 STREET ADDRESS       5.3 STREET ADDRESS       ITV-ST-ZIP         ITV-ST-ZIP       5.4 CITY-ST-ZIP       5.4 CITY-ST-ZIP       ItLE       Change       Addition         AME       DELETE       6.1 TITLE       6.1 TITLE       Change       Addition         AME       DELETE       6.1 TITLE       Change       Addition         ITV-ST-ZIP       DELETE       6.1 TITLE       Change       Addition         AME       6.3 STREET ADDRESS       6.3 STREET ADDRESS       It concerns and 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 annual report or supplemental annual 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 appeares in Block 13 if chapted or other externee to execute this report as required by Chapter 617, Florida Statutes; and that my name	STREET ADDRESS 412 NE 3RD AVE					
AME       52 NAME         TREET ADDRESS       5.3 STREET ADDRESS         ITY-ST-ZIP       5.4 CITY-ST-ZIP         ITLE       DELETE         6.1 TITLE       Change         AME       6.2 NAME         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       Change         AME       6.3 STREET ADDRESS         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.4 CITY-ST-ZIP         4. I do 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 annual report or supplemental annual 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 13 if chapted are or the addedment with en endedment	CITY-ST-ZIP FT. LAUDERDALE FL	DELETE	· · · · · · · · · · · · · · · · · · ·		Change Addition	
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It is 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	STREET ADDRESS					
TREET ADDRESS       6.3 STREET ADDRESS         ITY-ST-ZIP       6.4 CITY-ST-ZIP         4. I do 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 annual report or supplemental annual 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 13 if chapted or other advanced or other exemptions the end does	TITE	DELETE			Change Addition	
64 CITY-ST-ZIP     64 CITY-	NAME STREET ADDRESS					
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CTJUAN LITENORMAN	I am an officer or director of the corporation or the	ie receiver or trustee amoower	ed to execute this re	port as required by Chapter 617, Florida Stati	utes; and that my name	
SIGNATURE: Atule Lucienam PED treasurer 2/25/97	alouature A Attack	Verson Presiden	udch	aladar		