

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003675

FILED
Apr 22, 2006
Secretary of State

Entity Name: TEACH, THE EDUCATORS' ASSOCIATION FOR CHILDRENS' HOME-SCHOOLING, INC.

Current Principal Place of Business:

821 NE 109 STREET
MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

821 NE 109 STREET
MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 65-0440260 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNEZ, ELENA
821 NE 109 STREET
MIAMI, FL 33161 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: CD () Delete
Name: ORAR, MARY
Address: 1200 NE 133 ST
City-St-Zip: NORTH MIAMI, FL 33161

Title: VD () Delete
Name: TARASIUK, CHRISTINE
Address: 6954 BOTTLE BRUGH DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: T () Delete
Name: NUNEZ, ELENA
Address: 821 NE 109 ST
City-St-Zip: MIAMI, FL 33161

Title: S () Delete
Name: GEORGE, DAWN
Address: 8101 NW 181 ST
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: CHISHOLM, ALEXA
Address: 8850 NW 191 ST
City-St-Zip: MIAMI, FL 33018

Title: D (X) Delete
Name: DRAKE, ROBBIE
Address: 6965 GLEN EAGLE DR
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: OXAR, MARY
Address: 1220 NE 133 ST
City-St-Zip: NORTH MIAMI, FL 33161

Title: S (X) Change () Addition
Name: KING, DEANN
Address: 2385 NE 185 ST
City-St-Zip: MIAMI, FL 33180

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

Title: D (X) Change () Addition
Name: HARDER, JEANNETTE
Address: 385 NE 89 ST
City-St-Zip: MIAMI, FL 33138

Title: D (X) Change () Addition
Name: DURAN, ROSY
Address: 9324 CARLYLE AVE
City-St-Zip: SURFSIDE, FL 33154

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 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: ELENA V. NUNEZ

Electronic Signature of Signing Officer or Director

T

04/22/2006

Date