

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000003830 (6)

1. Corporation Name

TEACH FOUNDATION, INC.



Principal Place of Business

**1402 KENNEDY CAUSEWAY
NORTH BAY VILLAGE FL 33141**

Mailing Address

**1402 KENNEDY CAUSEWAY
NORTH BAY VILLAGE FL 33141**

3. Date Incorporated or Qualified
08/03/1994

3a. Date of Last Report
03/08/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0509184

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

23

28

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALLEY, JAMES
2007 CALAIS DR
MIAMI FL 33141**

81 Name

WILY ELDER

82 Street Address (P.O. Box Number is Not Acceptable)

8937 NE 4 AVE. ROAD

83

84 City

MIAMI SHORES

FL

85 Zip Code

33138

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Wily Elder

WILY ELDER, PRESIDENT

1-19-96

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**PD
ELDER, WILY
1402 KENNEDY CAUSEWAY
NORTH BAY VILLAGE FL**

TITLE ☒ DELETE

**V
ALLEY, JAMES
2007 CALAIS DR
MIAMI FL**

TITLE ☒ DELETE

**S
CRAWFORD, KIMBERLY
8725 NE 4TH AVE RD
MIAMI SHORES FL**

TITLE ☐ DELETE

**T
HUNT, MARTHA
9675 NW 6TH AVE
MIAMI FL**

TITLE ☐ DELETE

**D
POUGH, SADIE
5801 NW 23RD AVE
MIAMI FL**

TITLE ☐ DELETE

**D
SCOTT, KAREN
3091 NW 64TH ST
MIAMI FL**

TITLE ☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Wily Elder **WILY ELDER**

Date

1-19-96 (305) 751-9459

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (12/95)