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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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May 14 1997 8:00am

Secretary of State

Modat

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

N95000002857 (9)

O'SAY CHILD DEVELOPMENT ENRICHMENT CENTER, INC.

Principal Place 255 S. LAKE A	Mailing Address P.O. BOX 574	074								
PAHOKEE FL 33476		PAHOKEE FL 33476-0574 US			3. Date Incorporated or Qualified 06/16/1995		te of Last Ro 05/01/199			
2. Principal Pi	ace of Business	28. Mailing Address				4. FEI Number Applied For			<u>-</u>	
Sulte, Apt.		Suile, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	-	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip 24	Country	Zip 3	Country	/		8. This corporation has liability for i	- ~ -	tax under s. ∃No	199.032,	
24	9. Name and Address of Currer		30			Florida Statutes 10. Name and Address of New Re				
***************************************	e, Italia and Address of Carro	K / logisto/ou rigotic	81	ΤN	lame	To: Harris and Address of How the	91810100 7	180111		
WILLIAMS, PATRICIA										
	AKE AVE.	82 Street Ad			treet Addre	ss (P.O. Box Number is Not Acceptab	le)			
	E FL 33476	B3								
			84	 c	City			85 Zip (Code	
44-6		No. 1047 (600 5) (1 0)				ration submits this statement for the p	FL			
SIGNATURE	T familiar with, and accept the oblig Signature, typed or printed name of registered ag				ignature required	whon reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDS AND	DIRECTOR	96 IN 12	
TITLE	DP OFFICERS AN	D DELETE	1.1 TITLE		· —	ADDITIONS/CHANGES TO OFFIC	ENO AIVO	Change	Addition	
NAME	WILLIAMS, PATRICIA		1.2 NAME		}			onange		
STREET ADDRESS	12178 SUNSET BLVD.		1.3 STREET	I ADI	DRESS					
CITY-ST-ZIP	ROYAL P.B. FL		1.4 CITY- S		· · · · · · · · · · · · · · · · · · ·					
TITLE	DVP	☐ DELETE	21 TITLE					Change	Addition	
NAME	CHISHOLM, RICHARD		2.2 NAME	2.2 NAME						
STREET ADDRESS			2.3 STREET	2.3 STREET ADDRESS						
CITY-ST-ZIP	W. PALM BEACH FL		2. 4 CITY~	51-2	!IP					
TITLE	DT	DELETE	3.1 TITLE		-			Change	☐ Addition	
NAME			3.2 NAME							
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		1	3.3 STREET ADDRESS						
CITY-ST-ZIP	PAHOKEE FL 33476	DELETE	3.4. CITY-1	ST-Z		irector _ Kar Ohi		Change	Addition	
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STREET ADDRESS			4.3 STREET		BESS 51	40 Palm Hill 121. #NZ	40			
CITY-ST-ZIP			4.4 CITY - S		ı We	st Ailm Bch. IFL. 33	415			
TITLE		DELETE	5.1 TITLE	21-2			· · · -	Change	Addition	
NAME		_	5.2 NAME		ļ			-		
STREET ADDRESS			5.3 STREET	T ADI	DRESS					
CITY-ST-ZIP			5.4 CITY - S	<u> ST-Z</u>	(P					
TITLE		DELETE 6.1 TH						Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET	T ADI	DRESS	•				
CITY-S1-ZIP	**************************************		6.4 CITY-5							
Informatio	n indicated on this annual report or :	supplemental annual report is tru r the receiver or trustee empowe	e and accurred to execu	urat	te and that r	n Section 119.07(3)(i), Florida Statule ny signature shall have the same lega as required by Chapter 617, Florida S	l effect as	if made und	der oath; tha	