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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Jul 02 1998 8:00am

6-20-98 561-828-8588

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1998

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TREASURE COAST HOME SCHOOLERS, INC.

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Principal Place	e of Business	Mailing Address				
1885 SE DEL R PORT ST. LUCI US		POST OFFICE BOX 9131 PORT ST. LUCIE FL 34985-9131				3. Date Incorporated or Qualified 09/13/1995
00						4. FEI Number Applied For
2. Principal Pl	2. Principal Place of Business , 2a. Mailing Address					65-062 1633 Not Applicab
2001 S. F. Walton Rd. 28						5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State City & State						7. Is this nonprofit corporation a homeowners association?
Zip	Country _	Zip	T Co	untry	;	Yes No 8. This corporation owes or has paid the current year Intangible
3493		29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	nt Registered Agent		ļ.,		10. Name and Address of New Registered Agent
				61	Name	e
DURHAM, CANDY				82	Street	et Address (P.O. Box Number is Not Acceptable)
6204 SE ORANGE BLOSSOM HOBE SOUND FL 33455				83	 	
TIOUL O	Ogno i C 00100			84	Cit.:	AF 7in Code
					City	FL 85 Zip Code
office or re agent. I an SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was lations of, Section 617.0503, F	authorize Florida Sta	ed by	y the cor s.	ed corporation submits this statement for the purpose of changing its registere orporation's board of directors. I hereby accept the appointment as registered
12.	Signature, typed or printed name of registered agr	eni and little if applicable. (NO ID DIRECTORS	TE: Registere		nulangia Ine	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1]			☐ Change ☐ Additio
NAME	DURHAM, CANDY		1.21	IAME		
STREET ADDRESS	6204 SE ORANGE BLOSSON	I TR.	1.3 \$	TREET	ADDRESS	5
CITY - ST - ZIP	HOBE SOUND FL	- April 19			T-ZIP	
TITLE	WILLIO INEZ I	☐ DELETE	2.17			Change Additio
NAME STREET ADDRESS	WILUS, INEZ L. -204 BLAIRWOOD TRACE		4	IAME	ADDRESS	
CITY-ST-ZIP	JENSEN BEACH FL				ST. 7ND	
TITLE	&D	DELETE	3.1 1		51-211	Stillfried, Robin Schange Addition 1060 S. W. DuBois Ave. Pt. St. Lucie, 1819. 34953
NAME (TOWNSEND, CLARE		3.2 N	IAME		Stillfried, Robin
STREET ADDRESS	571 MONICA ST.		3.3 5	TREET	ADDRESS	1060 S.W. DuBois Ave,
CITY - ST - ZIP	PORT ST. LUCIE FL	·			ST - ZIP	Pt. St. Lucie, 1919. 34953
TITLE	TD	☐ DELETE	4.1 T			☐ Change ☐ Addition
NAME	MARINKO, LINDA			NAME		
STREET ADDRESS	338 N.W. DEARMAN ST.				ADDRESS	\$
CITY-ST-ZIP	PORT ST. LUCIE FL	DELETE		ITY-S	T-ZIP	Change Laddille
TITLE NAME		☐ nereje	5.1 T			Change Addition
STREET ADDRESS				IAME TOTET	ADDRESS	e l
CITY-ST-ZIP				HTY-S		'
TITLE		DELETE	6.1 T		n * <u>E</u> JF	Change Addition
NAME				IAME		
STREET ADDRESS					ADDRESS	s
CITY-ST-ZIP				ITY-S		
14. Lhereby c	ertify that the information supplied w on this annual report or supplement director of the corporation or the rector or Block 13 if changed, or or an atta	ith this filing does not qualify al annual report is true and ac eiver or trustee empowered to chment with an address	for the ex	emo	tion state	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio signature shall have the same legal effect as if made under oath; that I am an as required by Chapter 617, Florida Statutes; and that my name appears in