

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005001

1. Entity Name

PAHOKEE TARGET AREA PARENT GROUP, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90096 017 ****61.25

Principal Place of Business

Mailing Address

380 E 5TH ST
 PAHOKEE FL 33476

380 E 5TH ST
 PAHOKEE FL 33476-1920

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0641526

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITE, VIVIAN
 8729 DOVELAND DR
 PAHOKEE FL 33476

Name

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

City

FL

Zip Code

8. 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 *x Monica Brown*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03/21/00

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
DP	WHITE, VIVIAN	8729 DOVELAND DR	PAHOKEE FL 33476	<input checked="" type="checkbox"/>		Monica Brown	501 East Jordan Blvd.	Pahokee, FL 33476	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DV	DURHAM, TIA	441 DOCONUT RD	PAHOKEE FL 33476	<input checked="" type="checkbox"/>		Maria Camacho	617 Bacom Point Rd.	Pahokee, FL 33476	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DS	ALEXANDER, TENILLE	212 SHIRLEY DR	PAHOKEE FL 33476	<input checked="" type="checkbox"/>		Maria Guerra	3533 Airport Rd.	Pahokee, FL 33476	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DT	WHITE, CONNIE	522 PAHOKEE CIR	PAHOKEE FL 33476	<input checked="" type="checkbox"/>		Tia Durham	441 Coconut Rd.	Pahokee, FL 33476	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *x Monica Brown* **REQUIRE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/21/00

Date

Daytime Phone #

CR2E037 (9/99)