FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # N950000 5803

POMPANO BEACH PRESCHOOL PTC INC

FILED
May 20 1998 8:00am
Secretary of State

1801 NE 6TH ST
POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 4. FEI Number 6. Coc 28 0 2 4 Not Applied For Not Applied Fo
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Country Suite, Apt. #, etc. 3. Election Campaign Financing Fee Required Trust Fund Contribution Added to Fees 3. Chy & State 7. Is this nonprofit corporation a homeowners association? 4. Principal Place of Business 5. Certificate of Status Desired \$8.75 Additional Fee Required Trust Fund Contribution Added to Fees Trust Fund Fund Fund Fund Fund Fund Fund Fund
28. Mailing Address 26 Suite, Apt. #, etc. 26 Election Campaign Financing Trust Fund Contribution
Suite, Apt. #, etc. City & State Country State Corporation owns or has paid the current year Intangible Personal Property Tax due June 30.
Suite, Apt. #, etc. Suite, Apt. #, etc.
Trust Fund Contribution Added to Fees City & State City & State City & State City & State 7. Is this nonprofit corporation a homeowners association? 28 Zip Country Zip Zip Zip Zip Zip Zip Zip Zi
City & State 7. Is this nonprofit corporation a homeowners association? Vos. De No. No. No. No. No. No. No. No. No. No. No.
Zip Country Zip Country Zip Country Zip Country Zip
Personal Property Tax due June 30.
9. Name and Address of Current Registered Agent DEBBIE SUMMERS 1801 NE 67H ST POMPANO BEACH FL 33060 84 POMPANO BEACH FL 85 Zip Code 33060 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 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, am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Signature by the composition of the purpose of changing its registered agent. I am familiar with and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Signature by the composition of the purpose of changing its registered agent. I am familiar with and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE Signature for the form of the purpose of changing its registered agent. I am familiar with and accept the obligations of the statutes. SIGNATURE Signature for the form of the purpose of changing its registered agent. I am familiar with and accept the obligations of the statutes. SIGNATURE Signature for the form of the purpose of changing its registered agent. I am familiar with a familiar with a purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with a familiar
DEBBIE SUMMERS 1801 NC 67H ST POMPANO BEACH FL 33060 81 Name REY HADEN 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 COMPANO BEACH FL 33060 85 Street Address (P.O. Box Number is Not Acceptable) 86 COMPANO BEACH FL 85 Zip Code 87 OMPANO BEACH FL 85 Zip Code 88 OMPANO BEACH FL 85 Zip Code 88 OMPANO BEACH FL 85 Zip Code 88 OMPANO BEACH FL 85 Zip Code 89 OMPANO BEACH FL 85 Zip Code 80 OMPANO BEACH FL 85 Zip Code 81 Name CPOMPANO BEACH FL 85 Zip Code 82 Street Address (P.O. Box Number is Not Acceptable) 83 Direct Address (P.O. Box Number is Not Acceptable) 84 OMPANO BEACH FL 85 Zip Code 85 Zip Code 86 OMPANO BEACH FL 85 Zip Code 86 OMPANO BEACH FL 85 Zip Code 87 Street Address (P.O. Box Number is Not Acceptable) 88 Zip Code 89 OMPANO BEACH FL 85 Zip Code 80 Street Address (P.O. Box Number is Not Acceptable) 89 DEACH FL 85 Zip Code 80 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Name CPOMPANO BEACH FL 85 Zip Code 82 Street Address (P.O. Box Number is Not Acceptable) 83 Direct Address (P.O. Box Number is Not Acceptable) 84 OMPANO BEACH FL 85 Zip Code 85 Zip Code 86 OMPANO BEACH FL 85 Zip Code 87 DATE 88 Zip Code 88 Direct Address (P.O. Box Number is Not Acceptable) 88 Direct Address (P.O. Box Number is Not Acceptable) 89 DATE 80 DATE 80 DATE 81 Name CPOMPANO BEACH FL 85 Zip Code 82 DATE 83 DATE 84 DATE 85 Zip Code 86 DATE 86 DATE 86 DATE 87 DATE 87 DATE 88 DATE 88 DATE 88 DATE 89 DATE 80 DATE 80 DATE 80 DATE 81 DATE 82 DATE 83 DATE 84 DATE 85 DATE 86 DATE 86 DATE 87 DATE 88 DATE 88 DATE 88 DATE 89 DATE 80 DATE 80 DATE 80 DATE 80 DATE 81 DATE 81 DATE 82 DATE 83 DATE 84 DATE 85 DATE 86 DATE 86 DATE 87 DATE 88 DATE 88 DATE 88 DATE 88 DATE 89 DATE 80 DATE 80 DATE 80 DATE 80 DATE 81 DATE 81 DATE 81 DATE 82 DATE 83 DATE 84 DATE 85 DATE 86 DATE 86 DATE 87 DATE 88 DATE 88 DATE 88 DATE 88 DATE 89
DEBBIE SUMMERS 1801 NE 67H ST POMPANO BEACH FL 33060 82 Street Address (P.O. Box Number is Not Acceptable) 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 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, and familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. Signature bytes or profit four of registered adaptication (NOTE Represence Agent signature required when rensisting) 12. OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE PD Change Additional Part of the purpose of the purpose of the appointment as registered agent appointment as registered agent is profit to the purpose of the appointment as registered agent. I have been rensisting to the purpose of the appointment as registered agent
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 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, am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature types or profit the pulling obligations of, Section 617.0503, Florida Statutes. Signature types or profit the profit the policy of the profit that of the profit the profit that of the p
POMPANO BEACH FL 33060 84 COMPANO BEACH FL 85 Zip Code 33060 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 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 types or united the provisions of Section 617.0503, Florida Statutes. Signature types or united the provisions of Section 617.0503, Florida Statutes. Signature types or united the provisions of Section 617.0503, Florida Statutes. NOTE Represent Agent signature required when renslating) DATE 12. OF LICERS AND DIRECTORS IN 12 TITLE PD Change Additional Statutes In TANTA PERNAL 1.2 NAME TANTA PERNAL 1.3 STREET ADDRESS 2.2.3 NE 1.7 TH ATE
POMP NO BEACH FL 33060 84 CNOMP NO BEACH FL 85 Zip Code 33060 11. Pursuant to the provisions of Sections 617 05/02 and 617 1508. Florida Statutes the above-named corporation submits this statement for the purpose of changing its 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 Signature typical or profit of the purpose chancel tend of the page leads of the profit of the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered statutes. Signature typical or profit of the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered agent. I hereby accept the appointment as registered agent. I have been discovered agent and the purpose of changing its registered of the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered of the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent and the purpose of changing its registered agent. I have been discovered agent agent. I have been dis
11. Pursuant to the provisions of Sections 617.05/02 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, am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature: Sig
11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Horida Statutes the above-hanced corporation submits this state the first in 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, am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. Signature Signature bytes or period for or registered agent grad other appointment as registered agent signature required when re-instating) 12. Of LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME LISA WILSON Change Additional States of Florida Statutes and States of Florida Statutes. LISA WILSON LISA WILSON LISA WILSON LISA WILSON LISA WILSON LISTA WI
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. Signature types or united the configuration of the point agent with disposition. (NOTE Registrate Agent signature required when renslating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME LISA WILSON LISA WILSON 1.2 NAME TANIE TOTTH ATE THE LIST THE ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS 2.23 NE 1.7 TH ATE
agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. Signature Signature (which is not reported agent and all aports are (which is aports are produced agent and accept the disposance Agent signature required which renslating) 12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTILE P.D. Change Addition NAME LISA WILSON 1.2 NAME TANIA PERNAL STREET ADDRESS 2.23 NE 17 TH ALE
12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD
TITLE PD Change Addition NAME LISA WILSON 12NAME TANIA PERNAL STREET ADDRESS 1300 NE 26TH AVE 13STREET ADDRESS 223 NE 17TH AVE
NAME LISA WILSON 12NAME TANIA PERNAL 12NAME 12STREET ADDRESS 223 NE 17TH AVE
STREET ADDRESS 1160 NE 26TH AVE 13STREET ADDRESS 223 NE 17TH AVE
CITY ST. JIB POMPANO BEACH FL 33060 140TY-ST-ZIF POMPANO BEACH FL 33060
TIFLE VD Change Addition
NAME LISA SPINELLI 22 NAME KARBY HADEN
STREET ADDRESS 1251 NE 28 AVE 23 STREET ADDRESS 1801 NE 6TH 8T
CITY-SI-21P POMPANO BEACH, FL 33062 2.4CITY-SI-21P POMPANO BEACH FL 33060
TITLE T D LEARNING LES ACCIONED
NAME GAYNOR MASEMAN 32 NAME ROBEN BRICKETTO
STREET ADDRESS 3400 SPRING ST 335TREET ADDRESS 1041 SE 7TH AVE POINTENAND BEACH FL 33060
CITY-ST-ZIP POINT FAR B BEFELL TO SSEED 34 CITY-ST-ZIP TO VITTUE STEED
NAME 4. 2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP
NAME 5.2 NAME
STREET ADDRESS 5.3 STREET ADDRES
CITY-ST-7IP 5.4 CITY-ST-7IP Change Addition TITE DELETE 6.1 TiTLE Change Addition
nr/22/20n1ntnn22
###C1_00
1 books could that the information supplied with this files does not qualify for the exemption stated in Section 119 07(3)(i). 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 eath, 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
officer or effector of the corporation of the receiver or trostee empowered to except this report as required by ortables of try, include distinct, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.