

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005803

FILED
Jan 26, 2009
Secretary of State

Entity Name: POMPANO BEACH PRESCHOOL PTC INC.

Current Principal Place of Business:

1801 N.E. 6TH STREET
POMPANO BEACH, FL 33060

New Principal Place of Business:

1401 N.E. 4TH STREET
POMPANO BEACH, FL 33060

Current Mailing Address:

1801 N.E. 6TH STREET
POMPANO BEACH, FL 33060

New Mailing Address:

1401 N.E. 4TH STREET
POMPANO BEACH, FL 33060

FEI Number: 65-0628024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUSHINSKY, DONNA
1100 N.E. 4 ST.
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

LEMAY, SHARON A TREAS.
2109 N.E. 62 COURT
FT. LAUDERDALE, FL 33308 US

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: SHARON A. LEMAY

01/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: LEMAY, SHARON A
Address: 2109 N.E. 62 CT.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P () Delete
Name: PUSHINSKY, DONNA
Address: 1100 N.E. 4 ST.
City-St-Zip: POMPANO BEACH, FL 33060

Title: S () Delete
Name: KITTS, MISSY C
Address: 529 NW 16TH AVE
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON A. LEMAY

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01/26/2009

Electronic Signature of Signing Officer or Director

Date