2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90250 008 ****61.25

0055793

DOCUMENT # N98000004297

1. Entity Name
BRADENTON ACADEMY CARING FOR KIDS, INC.

Principal Place of Business
7900 40TH AVE WEST
BRADENTON FL 34209

Mailing Address
7900 40TH AVE WEST
BRADENTON FL 34209

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0881243 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JACKMAN, JAMES D ESQ.
5008 MANATEE AVE WEST
BRADENTON FL 34209

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PJ	☒ Delete
NAME	ACKOURY, HOLLY	
STREET ADDRESS	7900 40TH AVE WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	VPD	☐ Delete
NAME	WOLFE, CAROL	
STREET ADDRESS	7900 40TH AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	TD	☒ Delete
NAME	JACKMAN, LORRAINE	
STREET ADDRESS	7900 40TH AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	SD	☐ Delete
NAME	NARVAEZ, ZORAYA	
STREET ADDRESS	7900 40TH AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	☐ Change ☒ Addition
NAME	HANEY, DAYNA	
STREET ADDRESS	7900 40TH AVE.W.	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E037 (10/02)

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: SIGNATURE REQUIRED 4/9/03 941-792-7838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #