

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Mar 22, 2000 8:00 am**  
**Secretary of State**

03-22-2000 90033 043 \*\*\*\*61.25

**DOCUMENT # N99000002253**

1. Entity Name

**COALITION OF ESSENTIAL SCHOOLS FLORIDA, INC.**

Principal Place of Business

Mailing Address

**3531 DAVIE ROAD  
DAVIE FL 33314****3531 DAVIE ROAD  
DAVIE FL 33314-1604**

00042800



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

**65-0972760**

Applied For

Not Applicable

Zip

Country

Zip

Country

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****CIESLAK, NANCY  
3531 DAVIE ROAD  
DAVIE FL 33314**

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

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  
Department of State****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE | NAME           | STREET ADDRESS       | CITY-ST-ZIP               | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
|-------|------|----------------|-------------|---------------------------------|-------|----------------|----------------------|---------------------------|---------------------------------|--|
|       |      |                |             |                                 | D     | Nancy Cieslak  | 3531 Davie Road      | Davie, FL 33314           |                                 |  |
|       |      |                |             |                                 | C/T   | Pedro Bermudez | 250 NW 107 Ave. #103 | Miami, FL 33172           |                                 |  |
|       |      |                |             |                                 | C/T   | Sue Bruining   | 1800 SW 5 Place      | Fort Lauderdale, FL 33312 |                                 |  |
|       |      |                |             |                                 |       |                |                      |                           |                                 |  |
|       |      |                |             |                                 |       |                |                      |                           |                                 |  |
|       |      |                |             |                                 |       |                |                      |                           |                                 |  |
|       |      |                |             |                                 |       |                |                      |                           |                                 |  |

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:** Nancy Cieslak **REQUIRED** Nancy Cieslak 3/17/00 954-382-6260  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)