

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

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90056 022 \*\*\*\*61.25

DOCUMENT # NA90000005835 ✓

1. Entity Name

Community Alliance for Reform in Education, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

222 N Palmway  
Suite, Apt. #, etc.

3. Mailing Address

PO Box 190  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Wake Worth, FL

City & State

West Palm Beach, FL

4. FEI Number

65-0973791

Applied For

Not Applicable

Zip

33460

Country

USA

Zip

33402

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Lisa A. Carmone

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

222 N Palmway

City

Wake Worth

FL

Zip Code

33460

**DO NOT WRITE  
IN THIS SPACE**

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 Lisa A. Carmone

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

Lisa A. Carmone

(NOTE: Registered Agent signature required when reinstating)

April 17, 2002

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

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

TITLE Chairperson (CD)  
NAME Annetta Jenkins  
STREET ADDRESS 1555 Palm Beach Lakes Blvd #1500  
CITY-ST-ZIP West Palm Beach, FL 33409

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Vice Chair (CD)  
NAME Bruce McDowell  
STREET ADDRESS 585 NW 15th Court  
CITY-ST-ZIP Boca Raton, FL 33486

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Treasurer  
NAME Robert Arrick  
STREET ADDRESS 2715 N. Australian Ave  
CITY-ST-ZIP West Palm Beach, FL 33407

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Secretary  
NAME Sister Rachel Sena, OP  
STREET ADDRESS 641 SE 15th Ave #201  
CITY-ST-ZIP Boca Raton, FL 33435

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

Annetta Jenkins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/01)