

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000057924

1. Entity Name

Limestone-Shores Early Learning Center, Inc.

FILED

00 MAR 14 AM 9:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

6769 Church Street  
JUPITER, FL 33458

Mailing Address

~~6769 Church Street~~  
~~Jupiter, FL 33458~~  
4750 Oakes Rd, Suite 1  
DAVIE, FL 33314

2. Principal Place of Business

3. Mailing Address

6769 Church Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JUPITER, FL

4. FEI Number

65-0682136

Applied For

Not Applicable

Zip

Country

Zip

33458

Country

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Timothy H. Kenney, Esq.  
189 Bradley Place  
Palm Beach, FL 33480

7. Name and Address of New Registered Agent

Name ANNE C. TORRE  
Street Address (P.O. Box Number is Not Acceptable)  
6769 Church Street  
City JUPITER FL Zip Code 33458

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 Anne C. Torre, PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

3/13/2000

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSD  
NAME Levy, DAVID ☒ Delete  
STREET ADDRESS 4750 Oakes Road, Suite M  
CITY-ST-ZIP Davie, FL 33314

TITLE VD  
NAME Arnaldo, JAGLE ☒ Delete  
STREET ADDRESS 4750 Oakes Road, Suite M  
CITY-ST-ZIP Davie, FL 33314

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVSD ☒ Change ☐ Addition  
NAME ANNE C. TORRE  
STREET ADDRESS 6769 Church Street  
CITY-ST-ZIP JUPITER, FL 33458

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 3000003179233--3  
CITY-ST-ZIP -03/22/00--01013--028

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS \*\*\*\*\*158.75  
CITY-ST-ZIP ☐ Change ☐ Addition

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/2000 561 7480333

Date

Daytime Phone #

CR2E034 (9/99)