

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S86757** (9)

1. Corporation Name

BOCA RATON SPEECH AND LANGUAGE CENTER, INC.

Principal Place of Business

**2499 GLADES RD.
STE. #105
BOCA RATON FL 33431
US**

Mailing Address

**2499 GLADES RD.
STE. #105
BOCA RATON FL 33431
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/11/1991

3a. Date of Last Report

04/26/1994

4. FEI Number

65-0289191

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 9960 Central Park Blvd So.

2a. Mailing Address

27 9960 Central Park Blvd So.

Suite, Apt. #, etc.

22 Suite 203

Suite, Apt. #, etc.

27 Suite 203

City & State

23 Boca Raton, FL

City & State

28 Boca Raton, FL

Zip

24 33428

Country

25 US

Zip

29 33428

Country

30 US

9. Name and Address of Current Registered Agent

**BERLINGER, SUSAN M.
6666 H MONTEGO BAY BLVD.
BOCA RATON FL 33433**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent)

(Signature of New Registered Agent)

(Date)

12. OFFICERS AND DIRECTORS

**P
BERLINGER, SUSAN M
6666 H. MONTEGO BAY BLVD.
BOCA RATON FL 33433**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *Susan Berlinger*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature of Agent