

2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 734833

Entity Name: GERTRUDE WALDEN CHILD CARE CENTER, INC.

Current Principal Place of Business:

601 LAKE STREET
STUART, FL 34994-3152

Current Mailing Address:

601 LAKE STREET
STUART, FL 34994-3152 US

FEI Number: 59-1651492

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CAVE, WENDELL
2029 NE GINGER TERRACE
JENSEN BEACH, FL 34957 US

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: WENDELL CAVE

10/24/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name ALLISON, CAROL
Address 598 SW FELDMAN AVE
City-State-Zip: PORT ST. LUCIE FL 34953

Title OTHER
Name HARVERY, PHILLIP
Address 5821 SE COLEE AVENUE
City-State-Zip: STUART FL 34997

Title ED
Name WASHINGTON, THELMA M.
Address 184 NE BLAIRWOOD TRACE
City-State-Zip: JENSEN BEACH FL 34957

Title OTHER
Name GILLESPIE, PHYLLIS
Address 2142 NE MARLBERRY LANE
City-State-Zip: JENSEN BEACH FL 34957

Title SECRETARY
Name WORLEY, CLAUDIA
Address 2269 HUNTERS CLUB WAY
City-State-Zip: PALM CITY FL 34990

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: THELMA M. WASHINGTON

EXECUTIVE DIRECTOR

10/24/2016

Electronic Signature of Signing Officer/Director Detail

Date