

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

| Fiscal Years | 2009 | 2010 | 2011 | 2012 | 2013 |
|---|-----------------|-----------------|----------|----------|----------|
| Capital Expenditures | | | | | |
| Operating Costs | \$16,000 | \$22,400 | - | - | - |
| External Revenues | | | | | |
| Program Income (County) | | | | | |
| In-Kind Match (County) | | | | | |
| NET FISCAL IMPACT | \$16,000 | \$22,400 | - | - | - |
| # ADDITIONAL FTE POSITIONS (Cumulative) | | | | | |

Is Item Included in Current Budget: Yes No

Budget Account No: Fund 1002 Dept 147 Unit 1457 Object 4410
 Program EH20-GY08

B. Recommended Sources of Funds/Summary of Fiscal Impact:

C. Departmental Fiscal Review: _____

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development Comments:

| | |
|---|--|
| <p><u>Jim Oul</u> 2-9-09 OFMB MZ 2/9 (NO) 2/10/09 CN 2/6/09</p> | <p><u>[Signature]</u> 2/9/09 Contract Development and Control</p> |
|---|--|

This amendment complies with our review requirements.

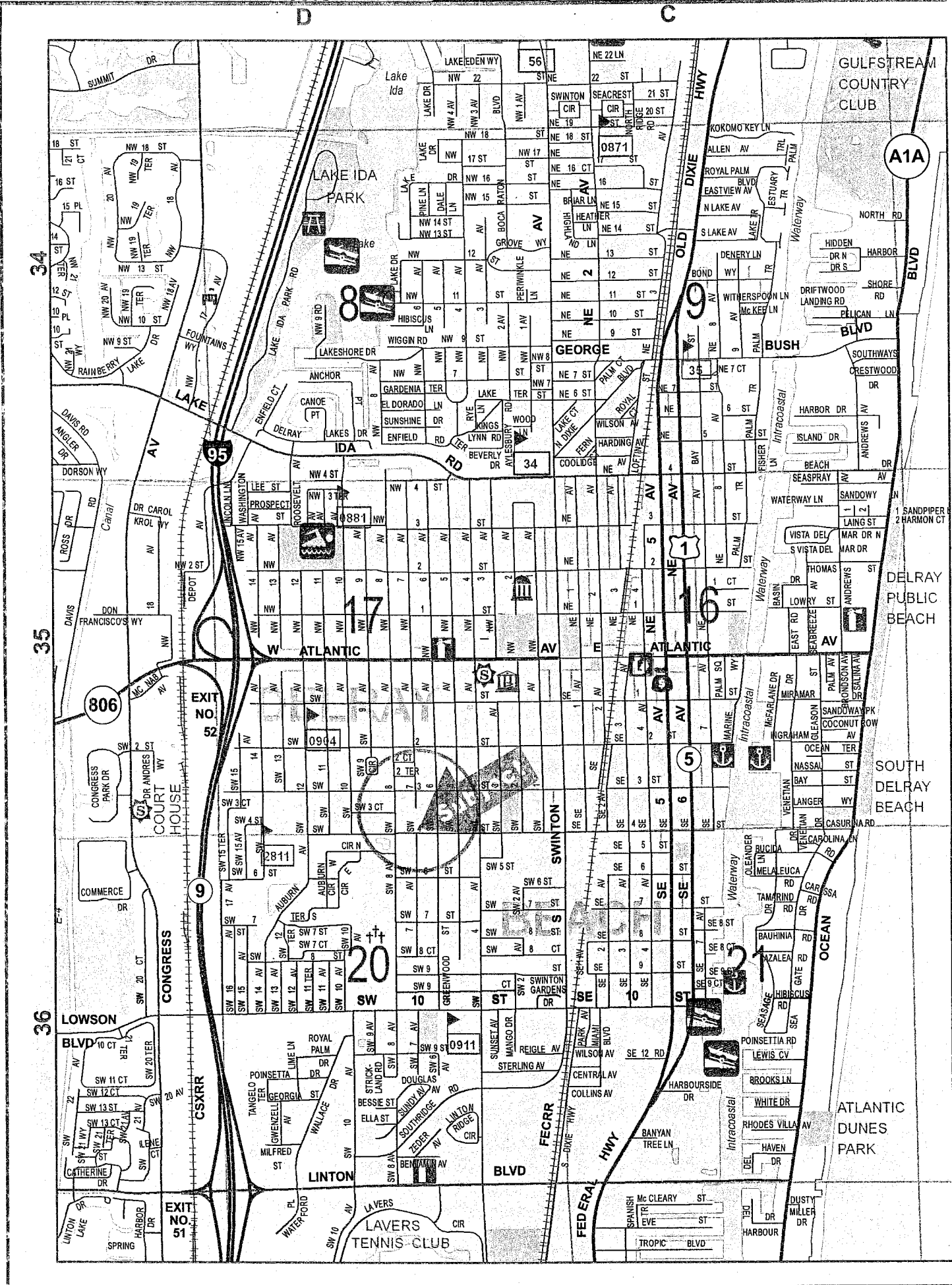
B. Legal Sufficiency:

[Signature] 2/10/09
 Assistant County Attorney

C. Other Department Review:

 Department Director

This summary is not to be used as a basis for payment.



LOCATION MAP

ATTACHMENT # 1



AMENDMENT NUMBER TWO TO LEASE AGREEMENT

THIS AMENDMENT NUMBER TWO TO LEASE AGREEMENT (the "Second Amendment") is made and entered into _____ by and between MILAGRO FOUNDATION, INC., a Florida Non Profit Corporation (hereinafter referred to as "Landlord") and PALM BEACH COUNTY, FLORIDA, a political subdivision of the State of Florida, on behalf of COMMUNITY SERVICES DEPARTMENT, HEAD START AND CHILDREN SERVICES DIVISION, (hereinafter referred to as "County").

WITNESSETH:

WHEREAS, Ages & Stages, Incorporated, the original Landlord, and County entered into a Lease Agreement dated June 18, 2002 (R2002-0957) (the "Lease"), for the use of the Premises as defined in the Lease, which includes the entire "South Building" and surrounding area, including parking, located at 346 SW 6th Avenue, Delray Beach, Florida 33444, and which Lease commenced on July 1, 2002, and expired on April 30, 2005; and

WHEREAS, the Lease provided County with one (1) three-year option to renew the Lease; and

WHEREAS, County exercised the renewal option on January 11, 2005 (R2005-0101) to extend the Term of the Lease from May 1, 2005, through April 30, 2008; and

WHEREAS, Ages & Stages, Incorporated, sold the Property including the Premises to Milagro Foundation, Inc., on December 8, 2006; and

WHEREAS, County and Landlord entered into Amendment Number One to Lease Agreement dated April 15, 2008 (R2008-0634) to extend the Term of the Lease for one year from May 1, 2008, through April 30, 2009; and

WHEREAS, the parties desire to extend the term of the Lease for an additional one (1) year and provide County with an additional one (1) year extension option; and

WHEREAS, Landlord hereby acknowledges that County is not delinquent in the payment of rent and is not in default of any of the terms and conditions of the Lease; and

NOW, THEREFORE, in consideration of the premises and mutual covenants and conditions contained herein, the parties agree to modify the Lease as follows:

1. The foregoing recitals are true and correct and incorporated herein by reference. Terms not defined herein shall have the same meaning and effect as in the Lease. Any reference to "Lease" contained herein shall include all amendments thereto.

2. **Section 1.03, Length of Term and Effective Date** is modified to extend the term of this Lease for an additional one (1) year commencing on May 1, 2009 and expiring on April 30, 2010 (the "Term").

3. **Section 1.04, Option to Extend** is deleted in its entirety and replaced with the following:

Section 1.04, Option to Extend.

County shall have the right and option, provided it is not then in default under this Lease, to extend the Term of this Lease for a period of one (1) year (the "Option Period"). County shall exercise such option by providing Landlord with written notice of such election prior to the end of the Term.

4. **Section 2.01, Annual Rent** is modified to provide that commencing on May 1, 2009, County shall pay Landlord an Annual Rent of Thirty-Eight Thousand Four Hundred Dollars (\$38,400.00), which shall be payable in equal monthly installments of Three Thousand Two Hundred Dollars (\$3,200.00) per month payable on the first day of each month in advance.

5. **Section 2.03 Rent Adjustment for Option Period** is deleted in its entirety and replaced with the following:

Section 2.03 Rent Adjustment for Option Period.

Commencing on the first day of the Option Period, the Annual Rent shall be adjusted by an increase of three percent (3%) above the prior year's rent.

6. **Section 15.15 Non Discrimination** is modified to include a prohibition against discrimination on the basis of age, gender expression or identity.

7. **Section 15.18, Disclosure of Beneficial Interests**, is hereby deleted in its entirety and replaced with the following:

Section 15.18 Disclosure of Beneficial Interests.

Landlord represents that simultaneously with Landlord's execution of this Second Amendment, Landlord has executed and delivered to County, the Landlord's Disclosure of Beneficial Interests attached as Exhibit "D" hereto and made a part hereof, (the "Disclosure") disclosing the name and address of every person or entity having a 5% or greater beneficial interest in the ownership of the Premises as required by Section 286.23 of the Florida Statutes unless Landlord is exempt under the statute. Landlord warrants that in the event there are any changes to the names and addresses of the persons or entities having a 5% or greater beneficial interest in the ownership of the Premises after the date of execution of the Disclosure until the Effective Date of this Second Amendment, Landlord shall immediately, and in every instance, provide written notification of such change to the Lessee pursuant to Section 15.04 of this Lease.

8. This Second Amendment shall become effective when signed by all parties and approved by the Palm Beach County Board of County Commissioners (the "Effective Date").

9. Except as modified by this Second Amendment, the Lease remains unmodified and in full force and effect and the parties hereby ratify, confirm, and adopt the Lease in accordance with the terms thereof.

REMAINDER OF PAGE INTENTIONALLY LEFT BLANK

IN WITNESS WHEREOF, Landlord and County hereto have executed this Second Amendment on the day and year first written above.

LANDLORD:

MILAGRO FOUNDATION, INC.,
a Florida non profit corporation

WITNESS:

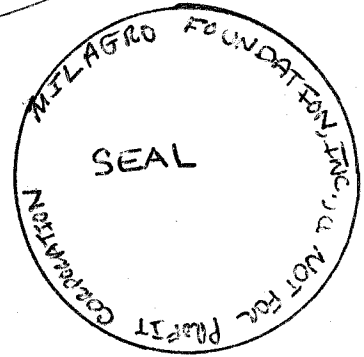
Gina Genovese
Witness Signature

Gina Genovese
Print Witness Name

Carol Zimm
Witness Signature

Carol Zimm
Print Witness Name

By: [Signature]
Jeffrey L. Cohen, President



ATTEST:

COUNTY:

SHARON R. BOCK
CLERK & COMPROLLER

PALM BEACH COUNTY, FLORIDA,
a political subdivision of the State of Florida

By: _____
Deputy Clerk

By: _____
John F. Koons, Chairman

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS

By: _____
Assistant County Attorney

By: [Signature]
Audrey Wolf, Director
Facilities Development & Operations

EXHIBIT "D"

LANDLORD'S DISCLOSURE OF BENEFICIAL INTERESTS

LANDLORD'S DISCLOSURE OF BENEFICIAL INTERESTS
(REQUIRED BY FLORIDA STATUTES 286.23)

TO: PALM BEACH COUNTY CHIEF OFFICER, OR HIS OR HER OFFICIALLY
DESIGNATED REPRESENTATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, this day personally appeared, _____
Jeffrey L. Cohen, hereinafter referred to as "Affiant", who being by me first
duly sworn, under oath, deposes and states as follows:

1. Affiant is the President of Milagro Foundation, Inc., (the
"Owner") which entity is the owner of the real property legally described on the attached
Exhibit "A" (the "Property").

2. Affiant's address is: 340 SW 6th Ave., Delray Beach, FL 33444

3. Attached hereto, and made a part hereof, as Exhibit "B" is a complete
listing of the names and addresses of every person or entity having a five percent (5%) or
greater beneficial interest in the Owner and the percentage interest of each such person or
entity.

4. Affiant acknowledges that this Affidavit is given to comply with Florida
Statutes 286.23, and will be relied upon by Palm Beach County in its lease of the
Property.

5. Affiant further states that Affiant is familiar with the nature of an oath and
with the penalties provided by the laws of the State of Florida for falsely swearing to
statements under oath.

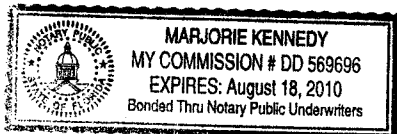
6. Under penalty of perjury, Affiant declares that Affiant has examined this
Affidavit and to the best of Affiant's knowledge and belief it is true, correct, and
complete.

FURTHER AFFIANT SAYETH NAUGHT.

Jeffery L. Cohen, Affiant
(Print Affiant Name)

The foregoing instrument was sworn to, subscribed and acknowledged before me this 6th
_____ day of JANUARY, 2009, by JEFFREY L. COHEN
[4 who is personally known to me or [] who has
produced _____ as identification and who did take an oath.

Marjorie Kennedy
Notary Public



(Print Notary Name)

NOTARY PUBLIC
State of Florida at Large

My Commission Expires: _____

EXHIBIT "A"

PROPERTY

THE SOUTH 100 FEET OF THE EAST 100 FEET OF THE SOUTH $\frac{1}{4}$ BLOCK 16, TOGETHER WITH THE NORTH 100 FEET OF THE SOUTH 204.88 FEET OF THE EAST 135 FEET OF THE SOUTH $\frac{1}{4}$ BLOCK 16, AND THE SOUTH 204.88 FEET OF THE EAST 100 FEET, LESS THE SOUTH 100 FEET AND THE NORTH 100 FEET OF THE SOUTH $\frac{1}{2}$ BLOCK 16. TOWN OF LINTON, FLORIDA, N/K/A DELRAY BEACH, ACCORDING TO THE PLAT THEREOF AS RECORDED IN THE PLAT BOOK 1, PAGE 3, PUBLIC RECORDS OF PALM BEACH COUNTY, FLORIDA.

ACORD™ EVIDENCE OF PROPERTY INSURANCE

DATE
1/15/2009

THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELOW HAS BEEN ISSUED, IS IN FORCE, AND CONVEYS ALL THE RIGHTS AND PRIVILEGES AFFORDED UNDER THE POLICY.

| | | | | |
|--|------------------|---|--|--|
| PRODUCER Presby & Company, Inc. Richard Presby PO Box 11150 Fort Lauderdale, FL 33339 | | PHONE (A/C. No., Ext.): (954)491-2216 | COMPANY North Pointe Insurance () - Ext. | |
| CODE: AGENCY CUSTOMER ID #: | SUB CODE: | LOAN NUMBER | POLICY NUMBER 2094118124 | CONTINUED UNTIL TERMINATED IF CHECKED |
| INSURED Milagro Foundation Inc. 340 S. W. 6th Avenue Delray Beach, FL 33444 | | EFFECTIVE DATE 11/29/2008 | EXPIRATION DATE 11/29/2009 | <input type="checkbox"/> |
| THIS REPLACES PRIOR EVIDENCE DATED: | | | | |

PROPERTY INFORMATION

LOCATION/DESCRIPTION

| | | |
|----------------------|--------------|-------------|
| 340 S. W. 6th Avenue | Delray Beach | FL Building |
| 346 S. W. 6 Avenue | Delray Beach | FL Building |

COVERAGE INFORMATION

| COVERAGE/PERILS/FORMS | AMOUNT OF INSURANCE | DEDUCTIBLE |
|---|---------------------|------------|
| 340 S. W. 6th Building Coverage Including Replacement Cost Coverage | \$250,000 | \$1,000. |
| 346 S. W. 6th Building Coverage Including Replacement Cost Coverage | \$260,000 | \$1,000. |

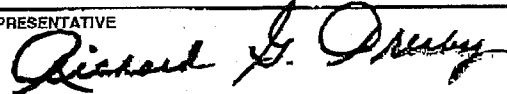
REMARKS (Including Special Conditions)

the board of county commissioners palm beach county is covered as an additional Insured as respects the building located at 346 s. w. 6th avenue, delray beach, fl

CANCELLATION

THE POLICY IS SUBJECT TO THE PREMIUMS, FORMS, AND RULES IN EFFECT FOR EACH POLICY PERIOD. SHOULD THE POLICY BE TERMINATED, THE COMPANY WILL GIVE THE ADDITIONAL INTEREST IDENTIFIED BELOW 30 DAYS WRITTEN NOTICE, AND WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY THAT WOULD AFFECT THAT INTEREST, IN ACCORDANCE WITH THE POLICY PROVISIONS OR AS REQUIRED BY LAW.

ADDITIONAL INTEREST

| | | |
|--|-------------------------------------|--|
| NAME AND ADDRESS Palm Beach County BOCC, Property and Real Estate Mgt. 2833 VISTA PARKWAY WEST PALM BEACH FL 33411- ATTN: NICHOLAS LAMBIASE FAX: 561-233-0210 | <input type="checkbox"/> MORTGAGEE | <input checked="" type="checkbox"/> ADDITIONAL INSURED |
| | <input type="checkbox"/> LOSS PAYEE | LOAN # |
| AUTHORIZED REPRESENTATIVE  | | |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

| | | | |
|--|--|---|---------------|
| PRODUCER Levay Ins Agency Inc | | THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. | |
| INSURED Milagro Foundation, inc. 340 SW 6th Ave Delray Beach, FL 33444 | | INSURERS AFFORDING COVERAGE | NAIC # |
| | | INSURER A: Colony Insurance Group | |
| | | INSURER B: | |
| | | INSURER C: | |
| | | INSURER D: | |
| | | INSURER E: | |

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR/ADD'L LTR/INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|-------------------------|---|---------------|-------------------------------------|--------------------------------------|---|
| A | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | GL3220665 | 09/11/2008 | 09/11/2009 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COM/OP AGG \$ 1,000,000 |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$ |
| | EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER | | | | WC STATU-TORY LIMITS CTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

| | |
|--|---|
| CERTIFICATE HOLDER Palm Beach County, Dept. of Park and Recreation 2700 6th Ave Lake Worth, FL 33461 | CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE |
|--|---|

ACORD 25 (2001/08)

CERTIFICATE OF LIABILITY INSURANCE

5197

DATE (MM/DD/YY)
06/01/2008

PRODUCER

AON RISK SERVICES OF FLORIDA
1001 BRICKELL BAY DRIVE, SUITE 1100
MIAMI, FL 33131
(305) 372-9950

Serial # 627742

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- COMPANY
A ZURICH AMERICAN INSURANCE COMPANY
- COMPANY
B
- COMPANY
C
- COMPANY
D

INSURED

Oasis Outsourcing Holdings, Inc.
Alt. Emp.: Milagro Foundation, Inc.
2054 Vista Parkway, Ste 300
West Palm Beach, FL 33411

VERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|---|---------------|----------------------------------|-----------------------------------|--|
| GENERAL LIABILITY | | | | |
| <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | GENERAL AGGREGATE \$ |
| <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR | | | | PRODUCTS - COMP/OP AGG \$ |
| <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT | | | | PERSONAL & ADV INJURY \$ |
| | | | | EACH OCCURRENCE \$ |
| | | | | FIRE DAMAGE (Any one fire) \$ |
| | | | | MED EXP (Any one person) \$ |
| AUTOMOBILE LIABILITY | | | | |
| <input type="checkbox"/> ANY AUTO | | | | COMBINED SINGLE LIMIT \$ |
| <input type="checkbox"/> ALL OWNED AUTOS | | | | BODILY INJURY (Per person) \$ |
| <input type="checkbox"/> SCHEDULED AUTOS | | | | BODILY INJURY (Per accident) \$ |
| <input type="checkbox"/> HIRED AUTOS | | | | PROPERTY DAMAGE \$ |
| <input type="checkbox"/> NON-OWNED AUTOS | | | | |
| GARAGE LIABILITY | | | | |
| <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ |
| | | | | OTHER THAN AUTO ONLY: |
| | | | | EACH ACCIDENT \$ |
| | | | | AGGREGATE \$ |
| EXCESS LIABILITY | | | | |
| <input type="checkbox"/> UMBRELLA FORM | | | | EACH OCCURRENCE \$ |
| <input type="checkbox"/> OTHER THAN UMBRELLA FORM | | | | AGGREGATE \$ |
| | | | | \$ |
| WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY | | | | |
| WC 29-38-687-06 | 06/01/08 | 06/01/09 | | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER |
| THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL | | | | EL EACH ACCIDENT \$ 1000000 |
| | | | | EL DISEASE - POLICY LIMIT \$ 1000000 |
| | | | | EL DISEASE - EA EMPLOYEE \$ 1000000 |
| OTHER | | | | |

RECEIVED
CAPITAL IMPROVEMENTS DIV
JUN 02 2008

RECEIVED

JUN 03 2008

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
BY THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF:
AGRO FOUNDATION, INC

CERTIFICATE HOLDER

PALM BEACH COUNTY BOARD OF
COUNTY COMMISSIONERS
DIRECTOR
2633 VISTA PARKWAY
WEST PALM BEACH, FL 33411



CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

AON RISK SERVICES, INC. OF FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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[Events](#)
No Name History

Entity Name Search

Detail by Entity Name

Florida Non Profit Corporation

MILAGRO FOUNDATION, INC.

Filing Information

| | |
|----------------------|---------------------|
| Document Number | N98000000152 |
| FEI Number | 650804625 |
| Date Filed | 01/12/1998 |
| State | FL |
| Status | ACTIVE |
| Last Event | CANCEL ADM DISS/REV |
| Event Date Filed | 09/30/2008 |
| Event Effective Date | NONE |

Principal Address

340 SW 6TH AVE
DELRAY BEACH FL 33444

Changed 04/22/2005

Mailing Address

340 SW 6TH AVENUE
DELRAY BEACH FL 33444 US

Changed 09/30/2008

Registered Agent Name & Address

COHEN, JEFFREY L
54 NE FOURTH AVE
DELRAY BEACH FL 33483

Name Changed: 04/22/2005
Address Changed: 09/30/2008

Officer/Director Detail

Name & Address

Title DP

COHEN, JEFFREY L
54 NE FOURTH AVENUE
DELRAY BEACH FL 33483 US

Title DS

KNAUS, MARYANN
1479 ESTUARY TRAIL
DELRAY BEACH FL 33483 US

Title DT

HINNERS, BRIAN J
625 AUBURN CIRCLE WEST
DELRAY BEACH FL 33444 US

Annual Reports

Report Year Filed Date

2006 01/23/2006
2007 02/05/2007
2008 09/30/2008

Document Images

- 09/30/2008 -- REINSTATEMENT
- 02/05/2007 -- ANNUAL REPORT
- 01/23/2006 -- ANNUAL REPORT
- 04/22/2005 -- ANNUAL REPORT
- 06/15/2004 -- ANNUAL REPORT
- 04/08/2004 -- ANNUAL REPORT
- 04/16/2003 -- ANNUAL REPORT
- 04/28/2002 -- ANNUAL REPORT
- 04/30/2001 -- ANNUAL REPORT
- 04/26/2000 -- ANNUAL REPORT
- 05/17/1999 -- ANNUAL REPORT
- 01/12/1998 -- Domestic Non-Profit

Note: This is not official record. See documents if question or conflict.

[Previous on List](#) [Next on List](#) [Return To List](#)

[Events](#) [No Name History](#)

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: 09/23/2008

REQUESTED BY: Martha LaVerghetta, Property Specialist, PREM

SENT TO: Rebecca Webb, Fiscal Manager II, Community Services

PROJECT NAME: Delray Beach Early Head Start (Milagro Center), Amendment #2

IS ITEM INCLUDED IN CURRENT BUDGET: YES NO

BUDGET ACCOUNT NO:

FUND: 1002 DEPT: 147 UNIT: 1457 OBJ: 4410 PROGRAM: EH20 - GY08

FIVE YEAR SUMMARY OF FISCAL IMPACT

| FISCAL YEARS | 2009 | 2010 | 2011 | 2012 | 2013 |
|-------------------------|-----------------|-----------------|-----------|-----------|-----------|
| CAPITAL EXPENDITURES | _____ | _____ | _____ | _____ | _____ |
| OPERATING COSTS (rent) | <u>\$37,700</u> | <u>\$22,400</u> | <u>--</u> | <u>--</u> | <u>--</u> |
| EXTERNAL REVENUE | _____ | _____ | _____ | _____ | _____ |
| PROGRAM INCOME (COUNTY) | _____ | _____ | _____ | _____ | _____ |
| IN KIND MATCH (COUNTY) | _____ | _____ | _____ | _____ | _____ |
| NET FISCAL IMPACT | <u>\$37,700</u> | <u>\$22,400</u> | <u>--</u> | <u>--</u> | <u>--</u> |

PROPOSED BCC MEETING DATE: November 18, 2008

BAS APPROVED BY: Rebecca E. Webb DATE: Oct 27, 2008

G:\PROPERTY MGMT SECTION\OUT LEASE\AGES & STAGES EARLY HEADSTART DELRAY\AMENDMENT NO. 2\BAS.DOC

ATTACHMENT # 4