

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001014

FILED
Sep 06, 2005
Secretary of State

Entity Name: TEDDY BEAR DAY CARE COMMUNITY CENTER, INC.

Current Principal Place of Business:

4519 FOREST LANE
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

4519 FOREST LANE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-0897211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KATHLEEN, MARRERO
4519 FOREST LANE
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

CASIMIRO, MARRERO
4519 FOREST LANE
LAKE WORTH, FL 33463 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: CASIMIRO MARRERO

09/06/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARRERO, KATHREEN
Address: 10719 TARVIS TR
City-St-Zip: LAKE WORTH, FL 33467

Title: SD () Delete
Name: MARRERO, PATRICIA
Address: 10719 TARVIS TR
City-St-Zip: LAKE WORTH, FL 33463

Title: V () Delete
Name: MARRERO, CASIMIRO
Address: 10719 TAMIS TRL
City-St-Zip: LAKE WORTH, FL 33463

Title: TD () Delete
Name: MARRERO, PAMELA
Address: 10719 TAMIS TRL
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARRERO, CASIMIRO
Address: 10719 TARVIS TR
City-St-Zip: LAKE WORTH, FL 33467

Title: SD (X) Change () Addition
Name: MARRERO, PATRICIA
Address: 10719 TAMIS TR
City-St-Zip: LAKE WORTH, FL 33463

Title: TD (X) Change () Addition
Name: MARRERO, CHRISTOPHER
Address: 4574 HUNTING TRAIL
City-St-Zip: LAKE WORTH, FL 33467

Title: S (X) Change () Addition
Name: NARVAJA, BETTINA
Address: 10719 TAMIS TRAIL
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHER MARRERO

TD

09/06/2005

Electronic Signature of Signing Officer or Director

Date