

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 18, 2002 8:00 am
Secretary of State

06-18-2002 90488 007 ***150.00

DOCUMENT # P01000086172 ✓
1. Entity Name
BRIGHT BEGINNINGS CHILD CARE CENTER, INC.

DO NOT WRITE IN THIS SPACE

809010

2. Principal Place of Business
4700 32nd Avenue
Suite, Apt. #, etc.

3. Mailing Address
4700 32nd Avenue
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Vero Beach, FL
Zip
32967
Country
US

City & State
Vero Beach, FL
Zip
32967
Country
US

4. FEI Number
43-1949895
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Richardson, Bonita
Street Address (P.O. Box Number is Not Acceptable)
4700 32nd Avenue
City Vero Beach, FL Zip Code 32967

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

**January 1 - May 1 Fee is \$150.00 ;
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	<u>PSF Richardson, Bonita 4700 32nd Avenue Vero Beach, FL 32967</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V Richardson, Willie Jr. 4700 32nd Avenue Vero Beach, FL 32967</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

CRZE034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Bonita Richardson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 299-0778
Date Daytime Phone #

Attachment



869518

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

May 29, 2002

BRIGHT BEGINNINGS CHILD CARE CENTER, INC.
4700 32ND AVENUE
VERO BEACH, FL 32967

Subject: **BRIGHT BEGINNINGS CHILD CARE CENTER, INC.**

Reference Number: **PG1060086172**

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/rg
ANNUAL REPORTS SECTION