

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001143

Entity Name: PARADISE CHILDCARE CORPORATION**Current Principal Place of Business:**6200 NW 11 STREET
SUNRISE, FL 33313**Current Mailing Address:**6200 NW 11 STREET
SUNRISE, FL 33313 US**FEI Number:** 20-8362821**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPENCE, TRACEY-ANN A
6200 NW 11 STREET
SUNRISE, FL 33313 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	SPENCE, D'WAYNE M
Address	6200 NW 11 STREET
City-State-Zip:	SUNRISE FL 33313

Title	P
Name	SPENCE, TRACEY ANN A
Address	6200 NW 11 STREET
City-State-Zip:	SUNRISE FL 33313

Title	VP
Name	PETERS, KERRY-ANN
Address	6200 NW 11 STREET
City-State-Zip:	SUNRISE FL 33313

Title	D
Name	SPENCE, ALTHEA E
Address	3311 NW 29 STREET
City-State-Zip:	LAUDERDALE LAKES FL 33311

Title	T
Name	WILLIAMS, FITZROY
Address	6200 NW 11 STREET
City-State-Zip:	SUNRISE FL 33313

Title	S
Name	TERESA, KELLEY
Address	6200 NW 11 STREET
City-State-Zip:	SUNRISE FL 33313

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: TRACEY ANN A SPENCE**PRESIDENT****04/10/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date