

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 389459

FILED
Mar 28, 2007
Secretary of State

Entity Name: THE CREATIVE PRE-SCHOOL, INC.

Current Principal Place of Business:

2746 W. THARPE ST. .
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2746 W. THARPE ST. .
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-1373361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHELPS PAMELA C
2073 CRESTDALE DR
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BROOKS, SUSAN C.,
Address: 2344 HAMPSHIRE WAY
City-St-Zip: TALLAHASSEE, FL 32308

Title: PD () Delete
Name: PHELPS, PAMELA C.,
Address: 2073 CRESTDALE DR
City-St-Zip: TALLAHASSEE, FL 32311

Title: SD () Delete
Name: ECKHART, MARY K.,
Address: 3247 ROBIN HOOD ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BROOKS, SUSAN C.,
Address: 2344 HAMPSHIRE WAY
City-St-Zip: TALLAHASSEE, FL 32308

Title: P/T (X) Change () Addition
Name: PHELPS, PAMELA C.,
Address: 2073 CRESTDALE DR
City-St-Zip: TALLAHASSEE, FL 32311

Title: S (X) Change () Addition
Name: STANNARD, LAURA C.,
Address: 407 CASTLETON CIR
City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA C. PHELPS

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03/28/2007

Electronic Signature of Signing Officer or Director

_____ Date