## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 447936

(6)

DAY CARE DYNAMICS, INC.

FILED
Apr 29 1997 8:00am
Secretary of State

Principal Place		Mailing Address										
WEST PALM BEACH FL 33409 US		SUITE 406 JUPITER FL 33469-3221	SUITE 406									
		U\$	US				3. Date Incorporated or Qualified   04/03/1974					
	lace of Business	2a. Mailing Address		_			4. FEI Number 59-1511037		Ŧ		plied F	
Sulte, Apt.	#, etc.	26					\$9.75 Automot					
22		27	<del></del>				5. Certificate of Status Desired Fee Required					
City & State	9	City & State	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Z(p)					This corporation has liability for intangible tax under s. 199.032.					
24	25 25 25 25 25 25 25 25 25 25 25 25 25 2	[29]	30	,			Florida Statutes Yes No					
NO	9. Name and Address of Curro	ent Registered Agent		81	Name		10. Name and Address of New Re	gistered /	tgent			
	2 JUPITER COVE DR #408			,								
	TER FL 33458			82 Street Addre			s (P.O. Box Number is Not Acceptab	ile)				
	1			83								
				84	City				85	Zip (	Code	
11. Pursuant	to the provisions of Sections 607.03	02 and 607.1508, Florida Statu	ites, the at	DOVO	o-named	i corpoi	ation submits this statement for the p	FL urpose of	chan	aina it	s regist	ered
Office of re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te ol Florida. Such change was	authorized	d by	z tae con	rporatio	n's board of directors. I hereby accep	ot the app	ointme	ent as	register	red
SIGNATURE			,									
12.	Signature, typed or printed name of impotential OFFICE DS: A		Dt . Registere:	d Age	nt signature	e required	when revisible()	DATE	DIDE	OTOD	C INL 40	
TITLE	OFFICERS AND DIRECTORS  DITFIE			115		1	ADDITIONS/CHANGES TO OFFICERS AND DIRECT					dilion
NAME	NORRISH, JAN		1.2 NA									
STREET ADDRESS	1542 JUPITER COVE DR		1.3 ST	REET	ADDRESS							
CITY-ST-ZIP	JUPITER, FL 00000			1.4 CITY - ST - ZIP					<del></del>			
TITLE NAME	NORRISH, JAMES D	☐ DELETE	2.1 111						∐ C	iange	∐ Ad	ldilion
STREET ADDRESS	1542 JUPITER COVE DR		2.2 NAME 2.3 STREET ADDRESS									
CITY-ST-ZIP	JUPITER, FL 00000		2. 4 GITY - ST - 7IP									
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NAME			3.2 NA	<b>ME</b>		1						
STREET ADDRESS					ADDRESS							
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NAME			4.2 N							iango		
STREET ADDRESS			4.3 \$1	REFT	ADDRESS							
CITY-ST-ZIP			4.4 CI	1Y - S	1 - ZIP							
TITLE		☐ DELETE	5 1 111						CI	hange	Ad	ddition
NAME STREET ADDRESS			5 2 NA									
STREET ADDRESS CITY-ST-ZIP			5 3 St		AODRESS							
TITLE	<del> </del>	DELETE	61 TH		1 - 21/-	<del> </del>			☐ CI	nange	. Ad	dition
NAME			6 2 NA	AME					_	•		
STREET ADDRESS			63\$1	REET	ADDRESS							
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informatio	n indicated on this annual report or	i supplemental annual report is:	true and a	Oct	rate and	d that m	n Section 119.07(3)(i), Florida Statuter by signature shall have the same loga as required by Chapter 607, Florida S	Leffect as	if ma	de una	der oath	n; thal