

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006 08:00 AM
Secretary of State

DOCUMENT # 549756

1. Entity Name
GINGERBREAD DAY SCHOOL, INC.



Principal Place of Business
**3324 NORTH MONROE STREET
TALLAHASSEE, FL 32303**

Mailing Address
**3324 NORTH MONROE STREET
TALLAHASSEE, FL 32303**



07032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1792603 Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BROOKS, RONALD W.
863 E. PARK AVE
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning.)

U00000567912

07/05/06-2006-014 150.00

**FILE NOW!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added In Fee**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TRIPPITELLI, NANCY
STREET ADDRESS	6241 WATER VALLEY DR
CITY- ST- ZIP	TALLAHASSEE, FL 32303
TITLE	VP
NAME	ALLEN, PHILLIP A
STREET ADDRESS	3608 CARRINGTON DRIVE
CITY- ST- ZIP	TALLAHASSEE, FL
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**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Phillip A. Allen
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

7/3/06