

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708764

FILED
Jan 10, 2006
Secretary of State

Entity Name: BRIGHTEST HORIZONS MISSION, INC.

Current Principal Place of Business:

10320 GLADIOLUS DRIVE
P.O. BOX 08072
FT. MYERS, FL 339088072 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 08072
FT. MYERS, FL 339088072 US

New Mailing Address:

FEI Number: 23-7378076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, CAROL
13310 CORAL DRIVE
FORT MYERS, FL 33908 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

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: RICHARDSON, JEAN M DR.
Address: 1513 HARBOR CT.
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: ADLER, JOHN S REV.
Address: 1406 S LARKWOOD SQ
City-St-Zip: FORT MYERS, FL 33919

Title: SD () Delete
Name: ADLER, WANDA
Address: 1406 S LARKWOOD SQ
City-St-Zip: FORT MYERS, FL 33919

Title: EDD () Delete
Name: SHADDOCK, KATHLEEN P
Address: 2303 SE 6TH TERR.
City-St-Zip: CAPE CORAL, FL 33990

Title: TD () Delete
Name: VERTICH, J. COREY
Address: 13817 PINE VILLA LANE
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: FINDLEY, BRUCE
Address: C/O DANIELS 13310 CORAL DR
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FINDLEY, BRUCE
Address: 14671 FAIR HAVENS ROAD
City-St-Zip: FORT MYERS, FL 33908

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN P. SHADDOCK

EDD

01/10/2006

Electronic Signature of Signing Officer or Director

Date