

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712877

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** WONDERLAND DAY CENTER, INC.

**Current Principal Place of Business:**

348 S KEECH STREET  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

348 S KEECH STREET  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

**FEI Number:** 59-1172788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DIXON, EVA M PD  
114 ALEATHA DR.  
DAYTONA BEACH, FL 32114 US

**Name and Address of New Registered Agent:**

DIXON, EVA M PD  
109 FLICKER WAY  
DAYTONA BEACH, FL 32117 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:** EVA M. DIXON

02/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** DIXON, EVA MAE  
**Address:** 109 FLICKER WAY  
**City-St-Zip:** DAYTONA BEACH, FL 32117

**Title:** VPD  
**Name:** HUGGINS, WILLIE MAE  
**Address:** 1134 GRAHAM AVE.  
**City-St-Zip:** HOLLY HILL, FL 32117

**Title:** SD  
**Name:** ADAMS, VONCELE LOUISE  
**Address:** 109 FLICKER WAY  
**City-St-Zip:** DAYTONA BEACH, FL 32117

**Title:** DT  
**Name:** MILLER, MESHELLE  
**Address:** 109 FLICKER WAY  
**City-St-Zip:** DAYTONA BEACH, FL 32117

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:** EVA M. DIXON

P/D

02/16/2011

Electronic Signature of Signing Officer or Director

Date