

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 22, 2004 8:00 am
Secretary of State

06-22-2004 90001 015 ****61.25

DOCUMENT # 717683

1. Entity Name

TINY TOT'S DAY NURSERY OF LAKE LAND, FLORIDA,
INC.



Principal Place of Business

Mailing Address

1715 MARTIN LUTHER KING JR. AVENUE
LAKE LAND FL 33805

1715 MARTIN LUTHER KING JR. AVENUE
LAKE LAND FL 33805

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (4/04)

4. FEI Number

59-1083127

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FISHER, JANICE
1715 MARTIN LUTHER KING JR. AVE
LAKE LAND FL 33805-0103

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DC ☐ Delete
NAME RUFFIN, JOHN
STREET ADDRESS 1715 MARTIN LUTHER KING JR. AVENUE
CITY-ST-ZIP LAKE LAND FL 33805

TITLE Director ☐ Change ☒ Addition
NAME Janice Fisher
STREET ADDRESS 1119 N. Webster Ave
CITY-ST-ZIP Lakeland, FL

TITLE VC ☐ Delete
NAME MOORE, DOROTHY
STREET ADDRESS 1715 MARTIN LUTHER KING JR. AVENUE
CITY-ST-ZIP LAKE LAND FL 33805

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME PHYALL, ANNIE
STREET ADDRESS 1715 MARTIN LUTHER KING JR. AVENUE
CITY-ST-ZIP LAKE LAND FL 33805

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME AUSTIN, FREDDIE
STREET ADDRESS 1715 MARTIN LUTHER KING JR. AVENUE
CITY-ST-ZIP LAKE LAND FL 33805

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME TABRON, ALBERTHA
STREET ADDRESS 1715 MARTIN LUTHER KING JR. AVENUE
CITY-ST-ZIP LAKE LAND FL 33805

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME HAWK, MILDRED
STREET ADDRESS 1715 MARTIN LUTHER KING JR. AVENUE
CITY-ST-ZIP LAKE LAND FL 33805

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: *Dorothy M. Moore* *Dorothy M. Moore* 5/11/04 863 682-6736
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #