ORGANIZATIONS' COMMITTEE FOR DAY CARE, INC.       Image: Committee for Day CARE, INC.       Image: Committee for Day CARE, INC.         Principal Place of Business       Mailing Address       3828 FOWLER STREET       Image: Committee for Day CARE, INC.         Principal Place of Business       Mailing Address       3828 FOWLER STREET       Image: Committee for Day CARE, INC.         Principal Place of Business       Image: Committee for Day CARE, Inc.       Image: Committee for Day CARE, Inc.       Image: Committee for Day CARE, Inc.         Suite, Apt. #, etc.       Suite, Apt. #, etc.       Suite, Apt. #, etc.       Image: Committee for Day CARE, Inc.       Image: Committee for Day CARE, Inc.         Compt Suite, Apt. #, etc.       Suite, Apt. #, etc.       Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.         Courty, Suite, Apt. #, etc.       Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.         2037001       Courty, Suite, Apt. #, etc.       Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.       Image: Courty, Suite, Apt. #, etc.	1. Entity Nam	MENT # 724582	EPORT (AR)		Sec Sec	FILEI 08, 2004 cretary 0 08-2004 90042 029	4 8:00 f Stat	e
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FT MYERS FL 33901       FT MYERS FL 33901       24 010 3 4.3         L. Propositive Record Business       3. Melling Adgesses       MORE       CR2E037 (11/03)         Sales, Apl. #, etc.       Sales, Apl. #, etc.       MORE       CR2E037 (11/03)         Diff. Sales, Apl. #, etc.       Sales, Apl. #, etc.       MORE       CR2E037 (11/03)         Diff. Sales, Apl. #, etc.       Sales, Apl. #, etc.       MORE       CR2E037 (11/03)         Diff. Sales, Apl. #, etc.       County A       E. Centricato of Status Desired       Sci25, 275 Additions         2 P. Sales, Apl. #, etc.       County A       S. Centricato of Status Desired       Sci25, 275 Additions         3 406 FALM BEACH BLVD.       FFL MYERS FL 33916       Street Address of New Registered Agent       Normal         HEDGE, SUSAN L       Street Address of P.O. Box Number is Not Acceptable)       Street Address of P.O. Box Number is Not Acceptable)         FT MYERS FL 33916       City       Street Address of P.O. Box Number is Not Acceptable)       Street Address of P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zic Code         Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zic Code         Street Address (P.O. Box Number is Not Acceptable)       City       Street Address of P.O. Box Number is Not Accep	Principal Plac	e of Business	Mailing Address		—			
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Image: Product A version       Sume Apple #, etc.       MOORE       CR2E037       (11/03)         City & States       Auto, Apl. #, etc.       MOORE       CR2E037       (11/03)         City & States       Auto, Apl. #, etc.       MOORE       CR2E037       (11/03)         City & States       Auto, Apl. #, etc.       County Sum       4. FEI Number       23-7249018       Autoin         20-33901       County Sum       S. Certificate of Status Desired       S 58, 75 Addition       Fee Required         8. Name and Address of Courtent Registered Agent       1. Name and Address of New Registered Agent       1. Name and Address of New Registered Agent         HEDGE, SUSAN L       3406 PALM BEACH BLVD.       Street Address (P.O. Box Number is Not Acceptable)       FEL       Zo Cool         3406 PALM BEACH BLVD.       FL       Direct Address (P.O. Box Number is Not Acceptable)       The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam familiar with, and the autopatienes of registered agent.       FL       Zo Cool         State Fuel Control Indicate agent       POEE Registered Agent sequence agent, or both, in the State of Florida. Tam familiar with, and the autopatienes of registered agent.       Added to Fees       Florida Department of State Department of Stat	·							
Zip 3301       Control 420       Zip       Country 420       S. Certificate of Status Desired       \$3.72 Addition Fee Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name         HEDGE, SUSAN L       3406 PALM BEACH BLVD. FT MYERS FL 33916       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         City       FL       Zip Code         Street Address (P.O. Box Number is Not Acceptable)       The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam familiar with, and the obligations of registered agent.         SIGNATURE       Street Address (P.O. Box Number is Not Acceptable)       Date         FLE NOW: FEE IS \$61.25       Number is Not Acceptable.       Date         Diate       Full NoW: FEE IS \$61.25       Street Address for Agent space registered agent.       Make Check Payable to; Florida. Department of State         00       OPFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10         01       OPFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10         01       OPFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10         01       OPFICERS AND DIFECTORS       III.       ADDITIONS/CHAN	FOR-	r MYERS	3625 FOR	WER ST			)37 (11/03)	
20       33001       Country, Lipping Coun	City & Stat	TMYORS FL	FOR TAV	ORS FL		3-7249018		plied For
HEDGE, SUSAN L 3406 PALM BEACH BLVD. FT MYERS FL 33916     Street Address (P.O. Box Number is Not Acceptable)       City     FL     Zip Code       City     FL     Zip Code       Street Address (P.O. Box Number is Not Acceptable)     City     FL       City     FL     Zip Code       Street Address (P.O. Box Number is Not Acceptable)     City     FL       City     FL     Zip Code       Street Address (P.O. Box Number is Not Acceptable)     City     FL       Street Address (P.O. Box Number is Not Acceptable)     City     FL       Street Address (P.O. Box Number is Not Acceptable)     City     FL       Street Address (P.O. Box Number is Not Acceptable)     City     FL       Street Address (P.O. Box Number is Not Acceptable)     City     FL       Street Address (P.O. Box Number is Not Acceptable)     Date     City       Street Address (P.O. Box Number is Not Acceptable)     Date     Date       Street Address (P.O. Box Number is Not Acceptable)     Date     Date       Street Address (P.O. Box Number is Not Acceptable)     Date     Date       Street Address (P.O. Box Number is Not Acceptable)     Date     Date       Street Address (P.O. Box Number is Not Acceptable)     Date     Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)     Date <td>Zip 334</td> <td>101 Country A</td> <td>Zip</td> <td>Country</td> <td>5. Certificate of Sta</td> <td>atus Desired</td> <td>2 \$8.75 Add</td> <td>litional</td>	Zip 334	101 Country A	Zip	Country	5. Certificate of Sta	atus Desired	2 \$8.75 Add	litional
3406 PALM BEACH BLVD. FT MYERS FL 33916       Set Polytess (i.e. Don Holden's Not Acceptable)       City		6. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registered	d Agent	
City       FL       Zip Code            City          FL       Zip Code             City          FL       Zip Code             City          FL       Zip Code             Stature.streed entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am flamiliar with, and             iGNATURE           Stature.streed or predeferred agent and tise if applicable           (NOTE Registered Agent signature required when remaining)           DATE             iGNATURE           Stature.streed or predeferred agent and tise if applicable           (NOTE Registered Agent signature required when remaining)           DATE               Stature.streed Agent signature required when remaining)           DATE           DATE             GOA           OFFICERS AND DIRECTORS           11.           ADDITIONS/OHANGES TO OFFICERS AND DIRECTORS IN 10           Drange             OFFICERS AND DIRECTORS           11.           ADDITIONS/OHANGES TO OFFICERS AND DIRECTORS IN 10           Change           Change             Nice Anoness           Change           Change           Change	340	6 PÁLM BEACH BLVD.		Street Addre	iss (P.O. Box Number is f	Not Acceptable)		
A. 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. Tam familiar with, and the obligations of registered agent.         SIGNATURE       Signature, typed or printed name of registered agent and tile if applicable.       (NOTE: Registered Agent agnature required when rendating)       DATE         FLE: NOW: FEE: IS \$61.25 Due: By May 1, 2004       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees       Make Check Payable to Florida Department of Stat         I0.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Intert ADDRESS         ITLE       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Intert ADDRESS         ITHE       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Intert ADDRESS         ITHE       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Intert ADDRESS         ITHE       VD       ITHE       ITHE       Change Intert ADDRESS         ITHE ADDRESS       SANIBEL FL 33957       ITHE       ITHE         ITHE ADDRESS       SANIBEL FL 33957       ITHE       ITHE         ITHE ADDRESS       SANIBEL FL 33957       ITHE       ITHE         ITHE ADDRESS       SANIBEL FL 339301 <td< td=""><td></td><td></td><td></td><td>City</td><td></td><td>F</td><td>Zip Code</td><td>e</td></td<>				City		F	Zip Code	e
IGNATURE Ignature typed or priviled name of registered agent and life if applicable (NOTE Registered Agent segnature required when remaining) DATE FILE INOW: FEE'IS \$61:25 Due By May 1; 2004 9. Election Campaign Financing Trust Fund Contribution OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DIRE HORNE, KERRY CD HORNE, KERRY FORT MYERS FL 33919 CTI-S1-2P TRE VILSON, MARJORIE HACKNEY; SHERL Delete NTLE SD CTI-S1-2P TRE ARE SD TRET ADDRESS CTI-S1-2P TRE ARE TRET ADDRESS CTI-S1-2P TRE TRET ADDRESS SD TRESS CTI-S1-2P TRE TREET ADDRESS CTI-S1-2P TRE TREET ADD	. The above	a named entity submits this statement f	or the purpose of changing its	I registered office or reg	istered agent, or both, in		<u> </u>	and acce
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