10/14/1981   04     2. Principal Place of Business   2a. Mailing Address   4. FEL Number     3   26.   Suite, Apt. #, etc.   59-2144193     21   27.   City & State   6. Election Campaign Financing   1     22   27.   Country   27.   5. Certificate of Status Desired   1     23   28.   Trust Fund Contribution   1   1   1   1     24   28.   29.   Country   29.   Country   8. This corporation has liability for intragible tax Florida Statutes   DX yes in No     24   28.   29.   Country   29.   Country   8. This corporation has liability for intragible tax Florida Statutes   DX yes in No   Name and Address of New Registered Agent   10. Name and Address of New Registered Agent     41   10. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   11. Name and Address of New Registered Agent   12. Name and Address of New Registered Agent   13. Name and Address of New Registered Agent agaitam registered Agent agait	1 Last Report 21/1995 Applied For Not Applicable \$8.75 Additional Feb Required \$5.00 May Be Added to Fees under s 199.032, tent	3a. Date of Last F 04/21/19 \$8.74 Feg \$5.0 Adde ngible tax under s No	3. Date Incorporated or Qualified 10/14/1981 4. FEI Number 59-2144193 5. Certificate of Status Desired 6. Election Campaign Financing	ry of State	Secretary DIVISION OF CO (5) alling Address 1600 MEL-O-DEE LANE ENGLEWOOD FL 34224	NC. Maii	F496	1996 MENT # Name EWOOD CHIL	DOCU 1. Corporatio ENGL Principal Place 1600 MEL-C
DOCUMENT #   F49651   (5)     1. coporation Name   ENGLEWOOD CHILD CARE, INC.     Principal Place of Business   Mailing Address     1600 MELODEE LANE ENGLEWOOD FL 34224   1000 MELODEE LANE ENGLEWOOD FL 34224   3. Date Incorporated or Qualified 10/14/1981     2. Principal Place of Business   2a. Maiing Address   4. FEI Number     2. Principal Place of Business   2a. Maiing Address   4. FEI Number     2. Principal Place of Business   2a. Maiing Address   4. FEI Number     2. Principal Place of Business   2a. Maiing Address   4. FEI Number     2. Principal Place of Business   2a. Maiing Address   4. FEI Number     2. Principal Place of Business   2a. Maiing Address   4. FEI Number     2. Principal Place of Business   2a. Maiing Address   5. Certifical of Status Deared     2. Principal Place of Business   2b   Country   8. This corporation has liability for intargoble tax     2. Apt # at the mean Address of Current Registered Agent   10. Name and Address of Now Registered Agent     11. Pursuent to this provide to to the fibre of 0002 and 607 1500. Florids Statutes   81     2. Mare and Address of Corporation School and of deates. Interky accept the supportment as to appoint on toto of the other of 0002 and 607 0500. Florids Statutes <tr< th=""><th>1 Last Report 21/1995 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032, tent</th><th>3a. Date of Last F 04/21/19 \$8.74 Feg \$5.0 Adde ngible tax under s No</th><th>3. Date Incorporated or Qualified 10/14/1981 4. FEI Number 59-2144193 5. Certificate of Status Desired 6. Election Campaign Financing</th><th>CORPORATIONS</th><th>(5) ailing Address 1600 MEL-O-DEE LANE ENGLEWOOD FL 34224</th><th>NC. Maii</th><th></th><th>MENT # n Name EWOOD CHIL e of Business D-DEE LANE</th><th>1. Corporatio ENGL Principal Place 1600 MEL-C</th></tr<>	1 Last Report 21/1995 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032, tent	3a. Date of Last F 04/21/19 \$8.74 Feg \$5.0 Adde ngible tax under s No	3. Date Incorporated or Qualified 10/14/1981 4. FEI Number 59-2144193 5. Certificate of Status Desired 6. Election Campaign Financing	CORPORATIONS	(5) ailing Address 1600 MEL-O-DEE LANE ENGLEWOOD FL 34224	NC. Maii		MENT # n Name EWOOD CHIL e of Business D-DEE LANE	1. Corporatio ENGL Principal Place 1600 MEL-C
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ENGLEWOOD CHILD CARE, INC.     Principal Place of Business   Mailing Address     100 ME-ODEE LANE ENGLEWOOD FL 3/224   100 ME-ODEE LANE ENGLEWOOD FL 3/224     2.   Principal Place of Business	1 Last Report 21/1995 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032, tent	3a. Date of Last F 04/21/19 \$8.74 Feg \$5.0 Adde ngible tax under s No	3. Date Incorporated or Qualified 10/14/1981 4. FEI Number 59-2144193 5. Certificate of Status Desired 6. Election Campaign Financing		1600 MEL-O-DEE LANE ENGLEWOOD FL 34224	Maili 11	d care, inc	EWOOD CHIL	ENGL Principal Place 1600 MEL-C
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ENGLEWOOD FL 3424   ENGLEWOOD FL 3424     3. Date Incorporated or Qualified 04     2. Principal Place of Business   2a. Maiing Address     1   26     Suite, Apt. #, etc.   5. Certificate of Status Desired     2.   27     Suite, Apt. #, etc.   5. Certificate of Status Desired     3   2a     2b   27     2chy & State   Country     2b   2a     2chy & State   Country     2chy & State   Country     2chy & State   Country     3   2a     2chy & State   Country     3   2b     2chy & State   2a     2chy & State   Country     4   2b     9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent     9. Name and Address of Sectors 607.0502 and 607.1508. Horida Statutes   81     82   Streat Address (P.O. Box Number is Not Acceptable)     82   Streat Address (P.O. Box Number is Not Acceptable)     83   64   City     11. Pursuant to the provisions of Sectors 607.0502 and 607.1508. Horida Statutes.	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032,	04/21/19 \$8.7 \$8.7 Fee \$5.0 Adde ngible tax under s No	10/14/1981     (       4. FEI Number     59-2144193       5. Certificate of Status Desired     []       6. Election Campaign Financing     []		ENGLEWOOD FL 34224				
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2.   Principal Place of Business   2a. Mailing Address   4. FEI Number     2.   Principal Place of Business   2a. Mailing Address   4. FEI Number     3.   26.   Suite, Apt. #, etc.   5. Certificate of Status Desired   0     2.   27.   Clty & State   5. Certificate of Status Desired   0     3.   27.   Clty & State   6. Election Campaign Financing   1     Zip   Country   Zip   Country   8. This corporation has liability for intengible tax     4.   25.   Country   20.   Sole   10. Name and Address of New Registered Agent     4.   25.   Country   2. This corporation has liability for intengible tax   Florida Statutes   Diff Name     HAZEN, RICHARD J.   22.   30   Florida Statutes   Diff Name     HAZEN, RICHARD J.   22.7 PENSACOLA ROAD   VENICE FL 34285   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent     11.   Pursuant to the provisions of Sachons 607 0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of change transfer with, and accept the obligations of, Sacton 607.0508, Florida Statutes, the above deve acept acept acept the appointment as thamilar with, and accept the	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032,	04/21/19 \$8.7 \$8.7 Fee \$5.0 Adde ngible tax under s No	10/14/1981     (       4. FEI Number     59-2144193       5. Certificate of Status Desired     []       6. Election Campaign Financing     []		Mailing Address				Internet
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Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   27     City & State   City & State   6. Election Campaign Financing	\$8.75 Additional Feb Required \$5.00 May Be Added to Fees under s 199.032,	S8.7 Fee S5.0 Adde ngible tax under s	5. Certificate of Status Desired 6. Election Campaign Financing		intening Flad 600		_	lace of Business	-1 .
City & State   27   City & State   Country   City & State   City & Country   City & State   City & Country   City & State   City & Country   City & City & Country   City &	\$5.00 May Be Added to Fees under s 199.032, ent	I Feo \$5.0 Adde ngible tax under s No	6. Election Campaign Financing		Suite, Apt. #, etc.			#, etc.	Suite, Apt.
20   20   Trust Fund Contribution     21p   Country   21p   Country   8. This corporation has liability for intangible tax     4   25   29   30   8. This corporation has liability for intangible tax     9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent     HAZEN, RICHARD J.   227 PENSACOLA ROAD   81   Name     VENICE FL 34285   83   84   City     81   Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as refamiliar with, and accept the obligations of, Section 607.0502 and 607.1508, Florida Statutes.     SIGNATURE   Strate of proton were directed agent are taken of proton and in the obligations of, Section 607.0502, Florida Statutes.     SIGNATURE   Strate of proton proton proton and proton and proton at the strate of Florida. Statutes.     SIGNATURE   OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     12.   OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     14.   12.   Intil te   13. STREE ADD	Added to Fees	Adden ngible tax under s	1 · · · · · · · · · · · · · · · · · · ·		City & State			0	City & State
4   25   29   30   C. Thride Statutes   X     9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent     HAZEN, RICHARD J.   227 PENSACOLA ROAD   81   Name   82   Street Address (P.O. Box Number is Not Acceptable)     VENICE FL 34285   83   84   City   FL     11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of charge was authorized by the corporation's board of directors. I heretry accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heretry accept the appointment as registered Agent with, and accept the obligations of. Section 607.0505, Florida Statutes.     SIGNATURE   Struture 'short or proton here of registered agent, and their applicable.   (NOTE: Registered Agent signature registered Agent signature registered agent signature registered agent signature specific when remaining   OATE     12.   OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     14.   Intel   VST   Intel Aboress   1.1 Title     Intel   VST   IDELETE   1.1 Title   IDELETE     Intel   PD   IDELETE   2.1 Title   <	ent	] No	C. A. B. S. M.	0	7:				
HAZEN, RICHARD J.   227 PENSACOLA ROAD     VENICE FL 34285   83     84   City     FL   94     11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of change or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as refamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.     SIGNATURE   Signifure synd or printed neme of regelered agent and tole if applicate.     Burniture synd or printed neme of regelered agent and tole if applicate.   INOTE: Regelered Agent synature regulated when reinstaing.     SIGNATURE   OFFICERS AND DIRECTORS   13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13.     NAME   FOSTER-DAILEY, GLENN   DELETE     11. Purpular   DELETE   1.1 TITLE     PD   DELETE   2.1 TITLE     NAME   FOSTER-DAILEY, GLENN   1.2 NAME     SIREFLADDRESS   1.4 CitY-ST-ZIP     INLE   PD   2.1 TITLE     FOSTER-DAILEY, JUDITH   2.1 STREET     SIREFLADDRESS   2.3 STREET ADDRESS     ENGLEWOOD, FL 000000   2.4 CitY-ST-ZIP     INLE		stered Agent	Florida Statutes 🛛 🕅 Yes 🗌 No		3	29	-	25	n i
HAZEN, RICHARD J.   227 PENSACOLA ROAD     227 PENSACOLA ROAD   82     Street Address (P.O. Box Number is Not Acceptable)     83     84   City     83     84   City     84   City     85     86   City     87   City     88     89   City     84   City     85   City     86   City     87   City     88   City     89   City     89   City     80   City     81   City     82   Street Address (P.O. Box Number is Not Acceptable)     82   City     83   City     84   City     84   City     84   City     85   City     86   City     86   City     87   City     88   City     88   City     88   City	BE Zo Code		10. Name and Address of New Registered	81 Name	ered Agent	rrent Registe	ddress of Curre	9, Name and A	
227 PENSACOLA ROAD VENICE FL 34285   83     84   City     85   City     86   City     87   City     88   City     88   City     89   City     89   City     89   City     89   City     89   City     89   City     80   City     81   City     81   City     81   City     82   City     83   City     84   City     84   City     84   City     84   City     84   City	es Zo Codo		w (P.O. Box Number is Not Acceptable)						
B4   City   FL     11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of change or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as refamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.     SIGNATURE	DE Zo Codo						)		
FL     11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change transition with, and accept the obligations of, Section 607.0505, Florida Statutes.     Signature with, and accept the obligations of, Section 607.0505, Florida Statutes.     Signature with, and accept the obligations of, Section 607.0505, Florida Statutes.     Signature with, and accept the obligations of, Section 607.0505, Florida Statutes.     Signature wood or printed neme of regelered agont and tell if explicate     INOTE: Registered Agont signature required when reinstating:     DATE     2.     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND CIPECTORS     Intell VST     DELETE     FOSTER-DAILEY, GLENN     Intell ADDRESS     IGON MEL-O-DEE LANE     DELETE     INTER PD     DELETE     INTER PD     DELETE     INTER PD     DELETE     INTER PD     DELETE	DE Zio Codo	·····							• mar
Integration with, and accept the obligations of, Section 607.0505, Floridal Statutes.     Signature syndom pricted name of registered agont and tote if applicable     Signature syndom pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable     Integrations of pricted name of registered agont and tote if applicable	-		FL		The state Distribution (		2	the maniploop of	Dursuant /
Signature   Signature speed or printed nerre of registered agont and tote if applicable   (NOTE: Registered Agont signature required when reinstating:   DATE     12.   OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND D     TILE   VST   DELETE   1.1 TITLE     NAME   FOSTER-DAILEY, GLENN   12 NAME     STREET ADDRESS   1600 MEL-0-DEE LANE   1.3 STREET ADDRESS     CITY-ST-ZIP   ENGLEWOOD, FL 00000   1.4 CITY-ST-ZIP     NAME   FOSTER-DAILEY, JUDITH   2 NAME     STREET ADDRESS   1600 MEL-0-DEE LANE   2 STREET ADDRESS     CITY-ST-ZIP   DELETE   2 STREET ADDRESS     1600 MEL-0-DEE LANE   2 STREET ADDRESS     DELETE   2 STREET ADDRESS     IG00 MEL-0-DEE LANE   2 STREET ADDRESS     DELETE   2 STREET ADDRESS     IG00 MEL-0-DEE LANE   2 STREET ADDRESS     CITY-ST-ZIP   ENGLEWOOD, FL 000000   2 STREET ADDRESS     IG00 MEL-0-DEE LANE   2 STREET ADDRESS     CITY-ST-ZIP   DELETE   3.1 TITLE	ing its registered office gistered agent. I am	e of changing its i nent as registered	ition submits this statement for the purpose of on d of directors. I hereby accept the appointment as	the above named corpor- by the corporation's boa					
12.   OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND D     TILLE   VST   DELETE   1.1 TITLE     NAME   FOSTER-DAILEY, GLENN   1.2 NAME     STREET ADDRESS   1600 MEL-O-DEE LANE   1.3 STREET ADDRESS     CITY-ST-ZIP   ENGLEWOOD, FL 00000   1.4 CITY-ST-ZIP     TITLE   PD   DELETE   2.1 TITLE     NAME   FOSTER-DAILEY, JUDITH   DELETE   2.1 TITLE     STREET ADDRESS   1600 MEL-O-DEE LANE   2.3 STREET ADDRESS     CITY-ST-ZIP   DELETE   2.1 TITLE     INAME   FOSTER-DAILEY, JUDITH   2.2 NAME     STREET ADDRESS   1600 MEL-O-DEE LANE   2.3 STREET ADDRESS     CITY-ST-ZIP   DELETE   3.1 TITLE   DELETE			DATE:	the set store there ever be					SIGNATURE
VILE     VS1     DELETE     1.1 TITLE       VAME     FOSTER-DAILEY, GLENN     1.2 NAME       STR:ET ADDRESS     1600 MEL-O-DEE LANE     1.3 STREET ADDRESS       CITY-ST-ZIP     ENGLEWOOD, FL 00000     1.4 CITY-ST-ZIP       TITLE     DELETE     2 1 TITLE       VAME     FOSTER-DAILEY, JUDITH     DELETE       STREET ADDRESS     1600 MEL-O-DEE LANE     23 STREET ADDRESS       STREET ADDRESS     1600 MEL-O-DEE LANE     23 STREET ADDRESS       DITY-ST-ZIP     ENGLEWOOD, FL 00000     24 CITY-ST-ZIP	IRECTORS IN 12 Change Addition			13.	TORS				2,
STREET ADDRESS   1600 MEL-O-DEE LANE ENGLEWOOD, FL 00000   13 STREET ADDRESS     ITY-SI-ZIP   DELETE   21 TITLE     INE   PD   DELETE   21 TITLE     IME   FOSTER-DAILEY, JUDITH   22 NAME     ITREF ADDRESS   1600 MEL-O-DEE LANE   23 STREET ADDRESS     ITREF ADDRESS   ENGLEWOOD, FL 00000   24 CITY-ST-ZIP     ITUF   DELETE   3.1 HTLE	Change Addition	Change			DELETÉ		FY. GLENN		
DEV-S1-2IP     ENGLEWOOD, FL 00000     1.4 CITY-S1-ZIP       INLE     PD     DELETE     2.1 TITLE       IAME     FOSTER-DAILEY, JUDITH     22 NAME       ISTREEF ADDRESS     1600 MEL-O-DEE LANE     2.3 STREEF ADDRESS       ISTREEF ADDRESS     ENGLEWOOD, FL 00000     2.4 CITY-ST-ZIP       ITUE     DELETE     3.1 TITLE							DEE LANE	1600 MEL-O-	
AME FOSTER-DAILEY, JUDITH 22 NAME 22 NAME 23 STREET ADDRESS ENGLEWOOD, FL 00000 24 CITY-ST-ZIP 11 DELETE 3.1 HITLE				1.4 CITY - ST-ZIP	the or rer		D, FL 00000	1	
ITTY-ST-ZIP		Change	[		DELETE			FOSTER-DAI	
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JAME 3.2 NAME	Change 🔲 Addition	🗋 Change	. L						
3.3 STREET ADDRESS					Í				
CHY-ST-ZIP     34 CHY-ST-ZIP       ITLE     DELETE     4.11/LE		Change							
A THILE L	Change 🔲 Addition	🔲 Change	ι						
4.3 STREET ADDRESS 4.3 STREET ADDRESS									
01Y-S1-7IP 44 CITY-S1-7IP	Change 🔲 Addition	Change			DELETE				
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5 3 STREET ADDRESS 5 3 STREET ADDRESS				5 3 STREET ADDRESS					
>TY-ST-ZiP     54 CiTY-ST-ZiP       ITLE     DELETE     6 1 TiTLE	Addition		<u></u> г						
VAME 62 NAME	Change 🛄 Addition	Change	L					i i	
6.3 STREET ADDRESS									
64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florid		14. Electric Danked	the supremise stated in Castion 110 07(0)(). Fin	ed and does not evality fr	iling is voluntarily furnishe	ad with this filir	mation supplied	v certify that the info	4. do hereby
(4) To the edge being that the information indicated on this annual report or supplemental annual report or to execute this report as required by Chapter 607, Florid call, that the information indicated on this annual report or supplemental annual report or take and accurate and that my signature shall have the same legal efficient that I am an officer or director of the corporation or the receiver or trustee enpowered to execute this report as required by Chapter 607, Florida Statutes.	المعند الأسعاد المعند الأسعاد	a local affect if	and that my cloopt we chall have the same least	report is true and accuration incovered to execute this	or subdiemental annual n	rooration or th	rector of the corpo	am an officer or dir	