

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H40905

1. Entity Name

MERTHIE'S DAYCARE CENTER, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90194 001 ***150.00

Principal Place of Business

Mailing Address

1611 MERTHIE DR
 SANFORD FL 32771
 US

1611 MERTHIE DR
 SANFORD FL 32771-3149
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2555538

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MERTHIE, LILLIE B.
 1308 PERSIMMON AVE.
 P. O. BOX 2202
 SANFORD FL 32771

Name

Marilyn M. Martin

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

1808 S. Locust Avenue

SANford

FL

City

FL

Zip Code

32771

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.

SIGNATURE

Marilyn M. Martin

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

(NOTE: Registered Agent signature required when reinstating)

4/28/00

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
 NAME MERTHIE, LILLIE B.
 STREET ADDRESS 1308 PERSIMMON AVE
 CITY-ST-ZIP SANFORD FL

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

TITLE STD ☐ Delete
 NAME MERTHIE, MARILYN P
 STREET ADDRESS 1808 S. LOCUST AVENUE
 CITY-ST-ZIP SANFORD FL

TITLE Vice President ☒ Change ☐ Addition
 NAME MARILYN Merthie MARTIN
 STREET ADDRESS 1808 S. Locust Avenue
 CITY-ST-ZIP SANford, FL

TITLE D ☒ Delete
 NAME MERTHIE, OSCAR, JR.
 STREET ADDRESS 1308 PERSIMMON AVE
 CITY-ST-ZIP SANFORD FL

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

TITLE D ☐ Delete
 NAME MERTHIE, RONALD W.
 STREET ADDRESS 1303 PERSIMMON AVE
 CITY-ST-ZIP SANFORD FL

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

TITLE D ☐ Delete
 NAME MARTIN, CLIFFORD J.
 STREET ADDRESS 1808 S LOCUST AVE
 CITY-ST-ZIP SANFORD FL

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

TITLE D ☐ Delete
 NAME MERTHIE, LYNDON B
 STREET ADDRESS 148 UPSALA RD
 CITY-ST-ZIP SANFORD FL 32771

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marilyn M. Martin

Marilyn MARTIN

4/28/00

407 322-2077

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)