2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

~``2(UN	003 FOR PROFI	T CORPORA	ATION (UBR)	FILED Sep 05, 2003 8:00 am	
1. Entity Nan	MENT # H4090	5		Secretary of State 09-05-2003 90108 029 ***150.00	
			CON WE THE		
Principal Plac 1611 MERTHIE SANFORD FL US		Mailing Address 1611 MERTHIE DR SANFORD FL 32771 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES	
City & Stat		City & State		4. FEI Number 59-2555538 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent	Name	7. Name and Address of New Registered Agent	
MARTIN, MARILYN M 1808 S. LOCUST AVE			Street Address (P.O. Box Number is Not Acceptable)		
SANFORD FL 32771					
,			City FL Zip Code		
	named entity submits this statement for clons of registered agent.	the purpose of changing its re	egistered office or regis	gistered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: I	Registered Agent signature requ	equired when reinstating) DATE	
After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$750.0 k Payable to Florida Department of the state of			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
	VP MERTHIE, MARILYN P 1808 S. LOCUST AVENUE SANFORD FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	resident Addition larilyn Martin 808 S. Locust Ave Sanford, Fl 32771	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MERTHIE, RONALD W. 1303 PERSIMMON AVE SANFORD FL	Delete	TITLE VICE NAME STREET ADDRESS	ice President Ronald W. Merthie 303 Persimmon Ave SANford, Fl	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, CLIFFORD J. 1808 S LOCUST AVE SANFORD FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MERTHIE, LYNDON B 148 UPSALA RD SANFORD FL 32771	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME Street Address City-St-Zip		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		∵ □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attack ment with an address, with all other like empowered.

SIGNATURE:

Affachmene

Merthie's Daycare Center, Inc.

1611 Merthie Drive Sanford, FL 32771 70144202

August 21, 2003

RE: FEI # 59-2555538; Document # H40905

Division of Corporations
Uniform Business Report Files
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Per my conversation with your personnel this month, I am requesting a waiver of late fees for filing corporation papers. I did not receive the email that would have informed me that my corporation filing was not accepted.

Please allow me to re-file at the normal fee cost.

Sincerely,

Marilyn Martin Merthie's Daycare Center, Inc. Vice-President