

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J11210

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: MISS BUNNY'S TLC CHILDCARE, INC.

**Current Principal Place of Business:**

852 JUPITER BLVD NW  
PALM BAY, FL 32907 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BERNADINE BOWEN  
1682 GLEN COVE AVE. N.W.  
PALM BAY, FL 32907

**New Mailing Address:**

FEI Number: 59-2679002      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOWEN, BERNADINE J.  
1682 GLEN COVE AVE. N.W.  
PALM BAY, FL 32907

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BOWEN, BERNADINE J.,  
Address: 1682 GLEN COVE AVE. N.W.  
City-St-Zip: PALM BAY, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNADINE BOWEN

DP

01/05/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date