

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J16158

FILED
Jan 06, 2005
Secretary of State

Entity Name: MUNCHKINLAND CHILD CARE CENTER, INC.

Current Principal Place of Business:

4002 GARDEN STREET
TITUSVILLE, FL 32796 US

New Principal Place of Business:

3930 FAY BLVD.
COCOA, FL 32927 US

Current Mailing Address:

4002 GARDEN STREET
TITUSVILLE, FL 32796

New Mailing Address:

3930 FAY BLVD.
COCOA, FL 32927

FEI Number: 59-2700032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTLETT, GARY K.
4002 GARDEN STREET
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

BARTLETT, GARY K.
3930 FAY BLVD.
COCOA, FL 32927 US

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:

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARTLETT, GARY K.,
Address: 4002 GARDEN STREET
City-St-Zip: TITUSVILLE, FL

Title: VST () Delete
Name: BARTLETT, CAROL LYNN,
Address: 4002 GARDEN STREET
City-St-Zip: TITUSVILLE, FL

Title: D () Delete
Name: VAN VUREN, TIFFANY L
Address: 6755 OPAL AVE
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARTLETT, GARY K.,
Address: 3930 FAY BLVD.
City-St-Zip: COCOA, FL 32927 US

Title: VST (X) Change () Addition
Name: BARTLETT, CAROL LYNN,
Address: 3930 FAY BLVD.
City-St-Zip: COCOA, FL 32927 US

Title: D (X) Change () Addition
Name: VAN VUREN, TIFFANY L
Address: 6755 OPAL AVE
City-St-Zip: COCOA, FL 32927 US

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: GARY K. BARTLETT

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date