FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #			7	6	S	ß	3
1.	Corporation Name	U	, ,	U	٠	U	U

LITTLE PEOPLES LEARNING CENTER II. INC.

Principal Place of Business					
1224 SEVENTH STREET, S. SAFETY HARBOUR FL 34695					

FILED Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90250 030 ***158.75

	·							
Principal Place of Business Mailing Address						, , , , , , , , , , , , , , , , , , , ,		
1224 SEVENTH STREET, S. 1224 SEVENTH STREET, S.								
SAFETY HARBOUR FL 34695 SAFETY HARBOUR FL 34695			95			DO NOT WRITE IN THIS S	PACE	
					-	3. Date Incorporated or Qualifed		
						06/09/1987		ļ
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	T Ap	plied For
	ace of Edsiness	26				59-2816751	→	t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			-		\$8.75	
22	., .	27				5. Certifcate of Status Desired	Fee Re	quired
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	
Zip	. Country Zip		Country			8. This corporation owes the current year Inta-	ngible .	
24	25	29	30			Personal Property Tax.	Yes	□No
- 1	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered A	gent	
				81	Name			i i
	TON, JUDY			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
	7TH ST S							
SAFT	TEY HARBOR FL 34695			83				
				84	City		85 Zip (Code
					•	<u>_FL</u>		
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	i of Florida. Such change was a	uthorized	d by ti	named co he corpora	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoint	hanging its ment as re	registered gistered
SIGNATURE								
	Signature, typed or printed name of registered age			Agent	signature requ	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DS IN 12
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
TITLE	PD HIDVE		1.1 N				_,	
NAME	BENTON, JUDY K.				4 DDDE-00			_
STREET ADDRESS	1224 7TH ST S		1		ADDRESS			
CITY-ST-ZIP	SAFETY HARBOR FL	DELETE	1.4 C	<u> 17Y-ST-</u>	-ZIP		Change	Addition
TIFLE	SD NOODIO DANIEL D	ليا ولادداد			j			
NAME [MORRIS, DANIEL R		2.2 N					
STREET ADDRESS	1224 7TH ST S				ADDRESS			
CITY-ST-ZIP	SAFETY HARBOR FL	☐ DELETE	_	CITY-ST	-ZIP		Change	Addition
TITLÉ	PENTON DOMAID		3.1 T		1			
_NAME	BENTON, RONALD		32 N			الرافي ليها فالمنصوب الميا		-
STREET ADDRESS	1224 7TH ST S		- 1		ADDRESS			Ì
CITY-ST-ZIP	SAFETY HARBOR FL 34695	DELETE	3.4. C	TTY-ST	-ZIP		☐ Change	Addition
TITLE		- OFFEIG	4.11					
NAME					LOODEDO			ļ
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 C	<u>ПҮ-SТ-</u>	-4P		Change	☐ Addition
TITLE		- Defete	5.1 II					
NAME					ADDRESS			
STREET ADDRESS				ITY-ST	,	•		
CITY-ST-ZIP		☐ DELETE	5.4 C		-47		Change	☐ Addition
TITLE			6.2 N		-			
NAME					ADDRESS			
STREET ADDRESS			- 1				•	Ì
CITY-ST-ZIP			6.4 C	ITY-ST	-2112			

14. 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 annual report or supplemental annual 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 cerporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: