

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jan 18, 2008 08:00 AM  
Secretary of State

DOCUMENT # L06000116375

1. Entity Name  
HAPPY KIDS DAY CARE & LEARNING CENTER, LLC



Principal Place of Business

2748 WINDGUARD CIRCLE, SUITE 101  
WESLEY CHAPEL, FL 33543

Mailing Address

2748 WINDGUARD CIRCLE, SUITE 101  
WESLEY CHAPEL, FL 33543



01082008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-5983720

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

O'ROURKE, COLLEEN  
4805 W. LAUREL ST., SUITE 230  
TAMPA, FL 33607

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

U000000789593  
01/22/08-80032-011 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
THEOPHILLE, CARLA  
20106 SHADY HILL LANE  
TAMPA, FL 33647

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
THEOPHILLE, GILBERT  
20106 SHADY HILL LANE  
TAMPA, FL 33647

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE \_\_\_\_\_

Carla Z. Theophille