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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Mar 20 1998 8:00am Secretary of State

DOCUMENT # L38256 (8) 1. Corporation Name HELENA'S HAVEN PRESCHOOL & CHILDCARE, INC.						
Principal Place of Business Mailing Address					THE REPORT OF THE PARTY OF THE	61811 61811 61614 61614 61614 1864
3315 PEORIA RD		3315 PEORIA RD				
ORANGE PARK FL 32065 US		ORANGE PARK FL 32065 US		DO NOT WRITE IN T	HIS SPACE	
00					3. Date Incorporated or Qualified	
					12/19/1989	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
26 .					59-2980929	Not Applicable
Suite, Apt #, etc. Suite, Apt. #,					5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	-	City & State	City & State		8 Floation Compaign Financing	<u></u>
		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country				8. This corporation owes or has paid the	· · · · · · · · · · · · · · · · · · ·
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registe	red Agent
GA1	Y, <b>Jame</b> s F Jr.		81	Name		
4345 CEDAR RD				Street Add	ress (P.O. Box Number is Not Acceptable)	
ORANGE PARK FL 32065					· · · · · · · · · · · · · · · · · · ·	
			83			
			84	City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute						FL 65 Zip Gode
office or re agent. I ar	to the provisions of Sections 607.0502 agistered agont, or both, in the State om familiar with, and accept the obligat	and 607.1508, Florida Statu f Florida. Such change was ions of, Section 607.0605, F	tes, the above authorized by lorida Statutes	the corporal	coration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE .						
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	nt signaturo requi	red when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	
TITLE	D DELETE		1.1 TITLE		The strict of the table of the table	Change Addition
NAME	GAY, HELEN MARIE		1.2 NAME			_ • -
STREET ADDRESS	4345 CEDAR RD		1.3 STREET	ADDRESS		
CITY+ST-ZIP	ORANGE PARK FL	i i	: 1.4 CITY-ST-ZIP			
TITLE	D	DELETE 2.11				Change Addition
NAME	GAY, JAMES FRANK, JR.		2.2 NAME			
STREET ADDRESS	4345 CEDAR RD		2.3 STREET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL		2.4 CITY-ST-ZIP			
TITLE	☐ DELETE		3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP	DELETE		3.4. CITY-ST-ZIP			Change Addition
TITLE	DECE15		4.1 TITLE			C Anguille C Madition
NAME OXUCCT ADDDCCC			4. 2 NAME	ADDRESS		
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP	<u>.</u>	☐ DELETE	5.1 TITLE	- 211		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADORESS		
CITY-ST-ZIP			5.4 CITY-ST			
TITLE	DELETE		6.1 T(TLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST			
14. I hereby co	ertify that the information supplied with	this filing does not qualify f	or the exempt	ion stated in	Section 119.07(3)(i), Florida Statutes. I furthe	er 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 corporation 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.