

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L52083** (7)

1. Corporation Name

KIDS KAROUSEL, INC. OF CENTRAL FLORIDA



Principal Place of Business

**1527 DODD RD
WINTER PARK FL 32792-3669**

Mailing Address

**1527 DODD RD
WINTER PARK FL 32792-3669**

3. Date Incorporated or Qualified

02/15/1990

3a. Date of Last Report

07/06/1995

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

95-3013139

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**CHARLOTTE ROBERTS
1521 DODD RD
WINTER PARK FL 32792**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(In Block 13, Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	ROBERTS, CHARLOTTE A	
STREET ADDRESS	1521 DODD RD	
CITY-STATE-ZIP	WINTER PARK FL 32792-3669	
TITLE	VP	☐ DELETE
NAME	ROBERTS, GREGORY A.	
STREET ADDRESS	1511 DODD RD	
CITY-STATE-ZIP	WINTER PARK FL 32792-3669	
TITLE	ST	☐ DELETE
NAME	CHAMBERLIN, MICHELLE M.	
STREET ADDRESS	1511 DODD RD	
CITY-STATE-ZIP	WINTER PARK FL 32792	
TITLE	D	☐ DELETE
NAME	DANN, GLENA C.	
STREET ADDRESS	6971 ALOMA AVE APT-127	
CITY-STATE-ZIP	WINTER PARK FL 32792	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	S.T. Roberts, Michelle M.
3.3 STREET ADDRESS	1511 Dodd Rd.
3.4 CITY-STATE-ZIP	Winter Park, FL 32792
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE: **Charlotte Roberts / Pres.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-84-96

407-678-6675
Daytime Phone #

CR2E034 (12/95)