

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M83570

Entity Name: BED TIME, INC.

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1709 W TENNESSEE ST  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

% ROBERT A. JOHNSON  
831 S. E. FIFTH AVE  
POMPANO BEACH, FL 33060

**New Mailing Address:**

FEI Number: 59-2903877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOHNSON, ROBERT A.  
831 S. E. FIFTH AVENUE  
POMPANO BEACH, FL 33060 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JOHNSON, ROBERT A.  
Address: 831 S. E. FIFTH AVE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP  
Name: MURCHISON, GLENN  
Address: 9843 BEACH BLVD  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

SIGNATURE: ROBERT JOHNSON

PD

03/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date