


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # N00000006795
 1. Entity Name
GROWING UPWARD DEVELOPMENTAL PRESCHOOL, INC.



Principal Place of Business Mailing Address
14018 NORTH BOULEVARD **14018 NORTH BOULEVARD**
TAMPA, FL 33616 **TAMPA, FL 33616**

DO NOT WRITE IN THIS SPACE



01252005 No Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
59-3687849 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
AMAN, JEFFREY A
14502 N DALE MABRY HWY, STE 300
TAMPA, FL 33618

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000207911
 02/01/05-80083-010 61.25

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GREEN, CHERYL 2517 WESTHIGH AVENUE TAMPA, FL 33614 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GESTIEHR, CHRISTINE 12423 NORTH ARMENIA AVE TAMPA, FL 33612 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LOPEZ, LIA 1106 W WOODLAWN AVE TAMPA, FL 33603 |
| 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

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Cheryl A. Green* Cheryl A. Green 1-28-05 813-503-6495
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #