

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000003067

FILED
Oct 19, 2005
Secretary of State

Entity Name: LIL-ONES WORLD DAY CARE CENTER, INC.

Current Principal Place of Business:

1735 SE HAWTHORNE RD
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

1735 SE HAWTHORNE RD
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 59-3673297 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRANKLIN, JAMES G SR
1735 SE HAWTHORNE RD
GAINESVILLE, FL 32641 US

Name and Address of New Registered Agent:

FRANKLIN, CLEVELAND S SR
2008 ORCHARD PARK DRIVE
OCOE, FL 34761 US

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: CLEVELAND S FRANKLIN SR

10/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRANKLIN, CLEVELAND
Address: 1735 SE HAWTHORNE RD
City-St-Zip: GAINESVILLE, FL 32641

Title: S () Delete
Name: FRANKLIN, BETTY
Address: 1735 SE HAWTHORNE RD
City-St-Zip: GAINESVILLE, FL 32641

Title: T (X) Delete
Name: FRANKLIN, JACQUELINE
Address: 1735 SE HAWTHORNE RD
City-St-Zip: GAINESVILLE, FL 32641

Title: D (X) Delete
Name: FRANKLIN, JAMES
Address: 1735 SE HAWTHORNE RD
City-St-Zip: GAINESVILLE, FL 32641

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FRANKLIN, CLEVELAND S SR
Address: 2008 ORCHARD PARK DRIVE
City-St-Zip: OCOEE, FL 34761

Title: V (X) Change () Addition
Name: FRANKLIN, BETTY R
Address: PO BOX 744
City-St-Zip: HAWTHORNE, FL 32640

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLEVELAND S FRANKLIN SR

P

10/19/2005

Electronic Signature of Signing Officer or Director

Date