

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000333

FILED
Aug 11, 2003
Secretary of State

Entity Name: CRADLES TO CRAYONS OF INVERNESS, INC.

Current Principal Place of Business:

307 ZEPHYR STREET
INVERNESS, FL 34450

New Principal Place of Business:

Current Mailing Address:

307 ZEPHYR STREET
INVERNESS, FL 34450

New Mailing Address:

FEI Number: 02-0545554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LANGLEY, JOHN
307 ZEPHYR STREET
INVERNESS, FL 34450

Name and Address of New Registered Agent:

CHESTER, LARRY
12344 SHADOWBROOK LN
ORLANDO, FL 32828

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: LARRY CHESTER

08/11/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHESTER, LARRY
Address: 16304 STONEBROOK DR
City-St-Zip: SANFORD, FL 32772

Title: D () Delete
Name: HENRY, ROSE
Address: P.O. BOX 893
City-St-Zip: INVERNESS, FL 34451

Title: D () Delete
Name: SOUTHALL, TAMMY
Address: 6898 N BIGHORN PT
City-St-Zip: HERNANDO, FL 34442

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHESTER, LARRY
Address: 12344 SHADOWBROOK LN
City-St-Zip: ORLANDO, FL 32828

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

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

Title: D () Change (X) Addition
Name: CHESTER, LATASHA
Address: 407 POPPY LN
City-St-Zip: INVERNESS, FL 34452

Title: VP () Change (X) Addition
Name: CHESTER, TONI V
Address: 12344 SHADOWBROOK LN
City-St-Zip: ORLANDO, FL 32828

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: TONI CHESTER

VP

08/11/2003

Electronic Signature of Signing Officer or Director

Date