2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002163

FILED Jun 03, 2008 Secretary of State

Entity Name: LITTLE FAGLES CHRISTIAN PRE-SCHOOL INC

	rincipal Place of Business:	New Principal Place of Business:
2801 EAS ΓΑΜΡΑ, F	T 17TH AVE. IL 33605	
Current M	lailing Address:	New Mailing Address:
2801 EAS FAMPA, F	T 17TH AVE. L 33605	
n accordan	: 33-1109587 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation di d Address of Current Registered Agent:	
	_	•
0611 RIV	TARYA ESQ. /ERVIEW DRIVE /W, FL 33569 US	LEWIS, SHERRY 2801 EAST 17TH AVE TAMPA, FL 33605 US
	e named entity submits this statement for the of Florida.	he purpose of changing its registered office or registered agent, or both,
IGNATU	RE: SHERRY P.LEWIS	06/03/2008
	Electronic Signature of Registered	Agent Date
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Nddress: Dity-St-Zip:	P () Delete LEWIS, SHERRY 3109 CHIPCO STREET TAMPA, FL 33605	Title: () Change () Addition Name: Address: City-St-Zip:
	VP () Delete LEWIS, MICHAEL W JR. 3109 CHIPCO STREET	Title: () Change () Addition Name:
itle: lame: .ddress: :ity-St-Zip:	TAMPA, FL 33605	Address: City-St-Zip:
lame: ddress:		
ame: ddress: ity-St-Zip: itle: ame: ddress:	TAMPA, FL 33605 D () Delete PORTER, PAULINE 3109 CHIPCO STREET	City-St-Zip: Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SHERRY LEWIS D 06/03/2008