## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

TAMPA FL 33617

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

8718 N. 46TH STREET

## DOCUMENT # N02000003889

Country

8. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

FILE NOW: FEE IS \$61.25

13212 BURNES LAKE DRIVE

7608 LEMON WOOD COURT

17911 VILLA CREEK DRIVE

2506 E. STANLEY-MATTHEW CT.

MASON, EARL B SR.

**TAMPA FL 33612** 

TISDALE, SHIRLEY

Tampa FL 33625

BLUNTE, ANNE

TAMPA FL 33647

TAMPA FL 33604

METCALF, IRIS C

TAMPA FL 33625

**5458 PENTAIL CIRCLE** 

KENNEDY, YOLANDA

Principal Place of Business

2. Principal Place of Business

MASON, EARL B'SR.

8718 N. 46TH STREET **TAMPA FL 33817** 

the obligations of registered agent.

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

10.

TITLE

NAME

TITLE

NAME

TIRE

NAME

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-71P

CITY-ST-ZIP

8718 N. 46TH STREET TAMPA FL 33617

CRIBBERS, CRAWLERS & TODDLERS, INC.



Country

City

П

9. Election Campaign Financing

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

Trust Fund Contribution.

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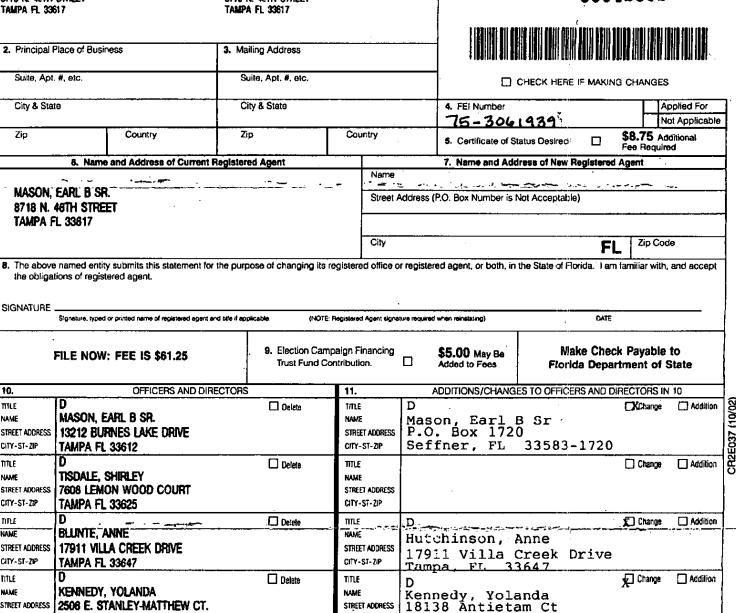
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## FILED May 21, 2003 8:00 am Secretary of State

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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.

CITY-ST-ZIP

SIGNATURE:

Tampa. FL 33647

Change

Change Change

☐ Addition

☐ Addition