

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

0071481

DOCUMENT # N02000007358

1. Entity Name

BRIGHT FUTURE PRESCHOOL, INC.



FILED

04 JAN 14 PM 5:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business

944 MORSE STREET
ALTAMONTE SPRINGS FL 32701

Mailing Address

P.O. BOX 150393
ALTAMONTE SPRINGS FL 32715-0393

2. Principal Place of Business

218 Newburyport Ave.

3. Mailing Address

P.O. Box 150393

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Altamonte Springs

City & State

Altamonte Springs, FL

4. FEI Number

753029463

Applied For

Not Applicable

Zip

Country

32701

USA

Zip

Country

32715-0393

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUTTS, RENEE' P
412 MONTICELLO DRIVE
ALTAMONTE SPRINGS FL 32701

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME BUTTS, RENEE' P ☐ Delete
STREET ADDRESS 944 MORSE STREET
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
NAME Butts, Renee P
STREET ADDRESS 412 Monticello Drive
CITY-ST-ZIP Altamonte Springs FL 32701

TITLE ☐ Change ☒ Addition
NAME Secretary
STREET ADDRESS Isaacs, Shunlam
CITY-ST-ZIP 719 Ridgewood Way
Winter Springs, FL 32708

TITLE ☐ Change ☒ Addition
NAME Member
STREET ADDRESS Neal, Jeanette
CITY-ST-ZIP 303 Magnolia Street
Altamonte Springs, FL 32701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800027011698
CITY-ST-ZIP 01/15/04--01020--018 **236.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

RENEE BUTTS

1/13/2004

407-339-3969

CR2E037 (10/02)