

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010230

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** LITTLE PEOPLES CHRISTIAN DAYCARE, INC.

**Current Principal Place of Business:**

38303 NORTH AVE  
ZEPHYRHILLS, FL 33540 US

**New Principal Place of Business:**

**Current Mailing Address:**

8536 BRAGG ST  
ZEPHYRHILLS, FL 33540

**New Mailing Address:**

**FEI Number:** 90-0174994

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUDSON, GERRY L  
8536 BRAGG ST  
ZEPHYRHILLS, FL 33540-541 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** HUDSON, MARY N  
**Address:** 8536 BRAGG ST  
**City-St-Zip:** ZEPHYRHILLS, FL 33540-541 US

**Title:** TRES  
**Name:** TYLER, JUDITH A  
**Address:** 36509 AUDREY ROAD  
**City-St-Zip:** DADE CITY, FL 33526 US

**Title:** DIR  
**Name:** MC KINNON, LINDA  
**Address:** 5314 BAYSTATE RD.  
**City-St-Zip:** PALMETTO, FL 34221 US

**Title:** SECR  
**Name:** FORD, MAUDE M  
**Address:** CHANCEY RD  
**City-St-Zip:** ZEPHYRHILLS, FL 33543 US

**Title:** D  
**Name:** TYLER, EDWARD A  
**Address:** 36509 AUDREY ROAD  
**City-St-Zip:** DADE CITY, FL 33526 US

I hereby 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 all other like empowered.

**SIGNATURE:** GERRY L HUDSON

RA

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date