

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006712

FILED
Apr 19, 2006
Secretary of State

Entity Name: WEE ROCK CHILD CARE, INC.

Current Principal Place of Business:

2140 W. STATE RD. 434
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2140 W. STATE RD. 434
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-4650596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTROFF, STEPHEN R.
940 CENTRE CIR., STE. 2005
ALTAMONTE SPRINGS, FL 32714 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: DPS () Delete
Name: CHAMPAGNE, CAROLYN
Address: 2140 W. STATE RD. 434
City-St-Zip: LONGWOOD, FL 32779

Title: DVT () Delete
Name: MILLER, SUE
Address: 302 LONESOME PINE DR.
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROLYN CHAMPAGNE

DPS

04/19/2006

Electronic Signature of Signing Officer or Director

Date