

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000006453

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** GIGGLES CHILDCARE AND LEARNING CENTER, INC.

**Current Principal Place of Business:**

2248 AIRPORT ROAD SOUTH  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 112075  
NAPLES, FL 34108

**New Mailing Address:**

2248 AIRPORT ROAD SOUTH  
NAPLES, FL 34112

FEI Number: 39-2057643      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

CHEFFY, JANE Y  
2375 TAMiami TRAIL NORTH, SUITE #310  
NAPLES, FL 34103      US

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: JANE Y. CHEFFY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: CHERRY, GRETA E  
Address: 2286 ARBOUR WALK CIRCLE #1428  
City-St-Zip: NAPLES, FL 34109

Title: DV      ( ) Delete  
Name: BRONSON, JEROME  
Address: 6070 COPPER LEAF LANE  
City-St-Zip: NAPLES, FL 34109

Title: DST      ( ) Delete  
Name: BRONSON, JEROME C  
Address: 2286 ARBOUR WALK CIRCLE #1428  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP      (X) Change ( ) Addition  
Name: CHERRY, GRETA E  
Address: 2248 AIRPORT ROAD SOUTH  
City-St-Zip: NAPLES, FL 34112

Title: DV      (X) Change ( ) Addition  
Name: BRONSON, JEROME  
Address: 6070A COPPER LEAF LANE  
City-St-Zip: NAPLES, FL 34116

Title: DST      (X) Change ( ) Addition  
Name: BRONSON, JEROME C  
Address: 6070B COPPER LEAF LANE  
City-St-Zip: NAPLES, FL 34116

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: GRETA E. CHERRY

DP

04/13/2009

Electronic Signature of Signing Officer or Director

Date