

Amended

03-20-2003 90153 023 ****70.00
N20874

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAR 26 PM 12:10

DOCUMENT # N20874

1. Entity Name
TOTS & TODDLERS DAY CARE CENTER INC.

Principal Place of Business
2861 N.W. 9TH STREET
POMPANO BEACH, FL 33069

Mailing Address
434 E ROAD
LOXAHATCHEE, FL 33470

2. Principal Place of Business

3. Mailing Address
2861 N.W. 9th St



State, Apt. #, etc.

State, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

City & State
Pompano Beach FL

4. FEI Number:
65-0021824

Applied For
Not Applicable

Zip Country

Zip Country
33069 USA

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MAMIE W. BULLARD
434 E. ROAD
LOXAHATCHEE, FL 33069**

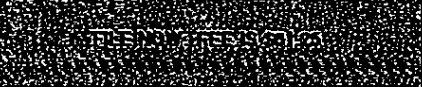
7. Name and Address of New Registered Agent

Name **Anthony Bignall**
Street Address (P.O. Box Number is Not Acceptable)
930 North West 11 Court
City **Fort Lauderdale FL** Zip Code **33311**

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 **Anthony Bignall**

DATE **03/18/2003**



9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. Officers and Directors

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
☒ Delete	D BULLARD, MAMIE	434 E. RD	LOXAHATCHEE, FL
☒ Delete	D SHAYLA BULLARD	434 E. RD	LOX, FL
☒ Delete	D BULLARD, JERMAINE	434 E RD	LOXAHATCHEE, FL
☐ Delete			
☐ Delete			
☐ Delete			

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
☒ Change ☐ Addition	Joyce McNeil	930 NW 11, Court	Fort Lauderdale, FL 33311
☒ Change ☐ Addition	Anthony Bignall	930 NW 11 Court	33311
☒ Change ☐ Addition	Andrea Barner	930 NW 11 Court	
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 198.07(3)(b), 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 registered 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 the empowered.

SIGNATURE: **Anthony Bignall**

DATE **3/18/03**

FILE # **954-977-4912**

3/26/03
aw