2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33577

FILED Feb 11, 2005 Secretary of State

Entity Name: SONSHINE DAY PRESCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business: 10000 NEWBERRY RD. GAINESVILLE, FL 32606 **Current Mailing Address: New Mailing Address:** 10000 NEWBERRY RD GAINESVILLE, FL 32606 FEI Number: 59-2965294 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COWART, PAULINE 10000 NEWBERRY RD. US GAINESVILLE, FL 32606 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete QUESENBERRY, JOYCE Name: Name: 6828 NW 39TH AVE Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TERRY, DIANE Name: Address: 205 SW 40TH TERR Address: City-St-Zip: GAINESVILLE, FL 326072788 City-St-Zip: Title: () Delete Title: () Change () Addition CREWS, TERRY Name: Name: 4630 NW 27TH TERR. Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: Title: () Delete Title: (X) Change () Addition ANDERSON, SANFY Name: Name: ANDERSON, SANDY 1904 SW 86TH TERRACE 1904 SW 86TH TERRACE Address: Address: City-St-Zip: GAINESVILLE, FL 32607221 City-St-Zip: GAINESVILLE, FL 32607221 Title: () Delete Title: (X) Change () Addition BOLT, MELANIE DENNIS, JEFF Name: Name: 10527 NW 14TH PLACE 4414 SW 102ND DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: GAINESVILLE, FL 32608 Title: () Delete Title: (X) Change () Addition COWART, PAULINE FUTCH, HOLLY Name: Name: Address: 4311 NW 13TH AVE Address: 1621 NW 94TH STREET GAINESVILLE, FL GAINESVILLE, FL 32606 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAULINE COWART D 02/11/2005