2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42721

LEACHMAN, JULIE

TAMPA, FL

3500 E FLETCHER AVE

Name: Address:

City-St-Zip:

FILED Jul 09, 2004 Secretary of State

Entity Name: BEST START, INC. **Current Principal Place of Business: New Principal Place of Business:** 4809 E BUSCH BLVD. SUITE 104 TAMPA, FL 33617 **Current Mailing Address: New Mailing Address:** 4809 E BUSCH BLVD. SUITE 104 TAMPA, FL 33617 US FEI Number: 59-3058876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRYANT, CAROL 4017 INMAN AVE TAMPA, FL 33609 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LINDENBERGER, JIM Name: Name: Address: 4017 INMAN AVE Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: () Delete Title: () Change () Addition MCLAMORE, LAUREN Name: Name: Address: 4227 BEACHWAY DR Address: City-St-Zip: TAMPA, FL City-St-Zip: Title: VSD () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JIM LINDENBERGER PD 07/09/2004