

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006356

1. Entity Name

KATHY'S ALL THINGS DAY CARE AND LEARNING CENTER,

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90174 010 ****61.25

Principal Place of Business

Mailing Address

3650 N.W. 52ND PLACE
BELL FL 32619-9539

3650 N.W. 52ND PLACE
BELL FL 32619-4049

00004701



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt., #, etc.

1079 Kushmer St.

Suite, Apt., #, etc.

1079 Kushmer St.

City & State

Bell, Florida

City & State

Bell, Florida

4. FEI Number

59-3485377

Applied For

Not Applicable

Zip

32619

Country

USA

Zip

32619

Country

Gilchrist

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPEARS, WILLIE JR.
3650 N.W. 52ND PLACE
BELL FL 32619-9539

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Willie Spears, Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/12/00

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME SPEARS, WILLIE JR.
STREET ADDRESS 3650 N.W. 52ND PLACE
CITY-ST-ZIP BELL FL 32619-9539

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME SPEARS, KATHY JR.
STREET ADDRESS 3650 N.W. 52ND PLACE
CITY-ST-ZIP BELL FL 32619-9539

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WASSON, KAREN
STREET ADDRESS 8751 N.W. 111TH LANE
CITY-ST-ZIP CHIEFLND FL 32626

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME Larry Langston
STREET ADDRESS 32095 US 129
CITY-ST-ZIP Bell, FL 32619

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME Karen Philman
STREET ADDRESS 939 NW 20th Ave
CITY-ST-ZIP Bell, FL 32619

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME Linda Philman
STREET ADDRESS US 129
CITY-ST-ZIP Bell, FL 32619

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kathy Spears, Sec. Treas.

1/12/00

352-463-2300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)