

2000 UNIFORM BUSINESS REPORT (UBR)

6

DOCUMENT # N99000003937

1. Entity Name

MRS. GLO'S CHILD DEVELOPMENT CENTER, INC.

FILED
Jul 05, 2000 8:00 am
Secretary of State

06-09-2000 90021 001 ****61.25

Principal Place of Business

Mailing Address

1304 E. DR. MARTIN LUTHER KING BLVD.
PLANT CITY FL 33566

1304 E. DR. MARTIN LUTHER KING BLVD.
PLANT CITY FL 33566

2. Principal Place of Business

3. Mailing Address

1304 E. Dr. Martin Luther King Blvd.
Suite, Apt. #, etc.

1304 E. Dr. Martin Luther King Blvd.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Plant City FL 33566

City & State

Plant City FL 33566

4. FEI Number

59-3586484

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

FISHER, GLORIA

1304 E. DR. MARTIN LUTHER KING BLVD.
PLANT CITY FL 33566

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

Gloria Fisher

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/30/2000

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 DP
NAME FISHER, GLORIA
STREET ADDRESS 1304 E. DR. MARTIN LUTHER KING BLVD.
CITY-ST-ZIP PLANT CITY FL 33566 ☐ Delete

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

TITLE DS
NAME MCEWEN, SAUN
STREET ADDRESS 1304 E. DR. MARTIN LUTHER KING BLVD.
CITY-ST-ZIP PLANT CITY FL 33566 ☐ Delete

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

TITLE DT
NAME MCEWEN, FREDARICA
STREET ADDRESS 312 S. WATERS STREET
CITY-ST-ZIP PLANT CITY FL 33566 ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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

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:

Gloria Fisher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

5/30/2000

CR2E037 (9/99)