

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90011 025 ***150.00

DOCUMENT # P00000111308

1. Entity Name

TAD POLES LEARNING CENTER CORP.



Principal Place of Business

212 N APOPKA AVE
INVERNESS FL 34450

Mailing Address

212 N APOPKA AVE
INVERNESS FL 34450

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

HANSEN, PENNY L
3335 E. ROTOR WING PATH
HERNANDO FL 34442

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Penny L. Hansen / Penny L. Hansen President 2/24/04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PS	<input type="checkbox"/> Delete
NAME	HANSEN, PENNY L	
STREET ADDRESS	3335 E ROTORWING PATH	
CITY-ST-ZIP	HERNANDO FL 34442	
TITLE	VT	<input type="checkbox"/> Delete
NAME	HANSEN, CHARLES R	
STREET ADDRESS	3335 E ROTORWING PATH	
CITY-ST-ZIP	HERNANDO FL 34442	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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:

Penny L. Hansen / Penny L. Hansen 2/24/04 (352) 560-4222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



Department of the Treasury
Internal Revenue Service
OGDEN, UT 84201

Attachment
#700000111308
44014726

Employer Identification Number:

22-3863408

Number of this Notice: CP- 136

Form: 941 Tax Period:

For assistance you may call us at:

1-800-829-0115

PLEASE NOTE
CORRECT
FEI #

ON
CORPORATION
ANNUAL REPORT
& SUN BIZ.ORG.

THANK YOU

TADPOLES LEARNING CENTER CORP
212 N APOKA
INVERNESS FL 34450-4240121

YOUR 2004 FEDERAL TAX DEPOSIT REQUIREMENTS

This letter explains your Form 941 federal tax deposit requirements for 2004. No response is needed, but please review the following information carefully.

Monthly Schedule Depositor - In October, we reviewed the Forms 941 you filed for the quarters ending September 30, 2002, December 31, 2002, March 31, 2003, and June 30, 2003, to determine your deposit requirements for 2004. You are a monthly depositor because your total tax liability for the four quarters was \$50,000 or less. This means that when you pay wages for any one month, your deposit is due by the 15th day of the following month.

\$100,000 Next-Day Deposit Rule - If your accumulated Form 941 tax liability reaches \$100,000 or more at any time during a calendar month, your deposit is due by the next banking day. After that, you must make your deposits semi-weekly rather than monthly. Semi-weekly means that if you pay wages on Wednesday, Thursday, or Friday, your deposit is due by the following Wednesday. If you pay wages on Saturday, Sunday, Monday, or Tuesday, your deposit is due by the following Friday. If your accumulated Form 941 tax liability reaches \$100,000 or more at any time during a semi-weekly period, your deposit is due the next banking day.

\$2,500 Rule - If your total tax liability for any quarter is less than \$2,500, you can pay the amount when you file your Form 941 instead of making deposits. If you're not sure your total tax liability for the quarter will be less than \$2,500, deposit using the monthly rules so you won't be subject to failure to deposit penalties.

It is your responsibility to determine which deposit schedule you should follow. Please contact us if you have problems making your first deposit as a result of your 2004 deposit schedule.

ELECTRONIC DEPOSIT REQUIREMENT

You must make your deposits electronically in 2004 if your total tax deposits during the 2002 calendar year exceeded \$200,000, or if you were required to use the Electronic Federal Tax Payment System (EFTPS) in 2003.

To get more information or to enroll in EFTPS, call 1-800-555-4477 or 1-800-945-8400. You can also visit the EFTPS Web Site at www.eftps.gov.

Helpful Hint: For faster service, try calling us any day except Monday when our call volumes are highest.