2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000003646



FILED Feb 25, 2008 8:00 am Secretary of State

1. Entity Nam TELLA'S		EN PRESCHOO	L, INC.					02-25-2008	90041	012 ***1	30.00
Principal Place of Business Maili				Mailing Address							
17274 S.W. 36TH AVE. RD.			17274 S.W. 36TH AVE. RD. OCALA, FL 34473								
Principal Place of Business - No P.O. Box # 3. Mailing Address											
Suite, Apt. #, etc.		s	Suite, Apt. #, etc.			02162008	Chg-P	CR2E	34 (12/06)	_	
City & State		C	ity & State		4. FEI Number 59-369	-			oplied For ot Applicable		
Zip	Zip Country			Zip Country		try	5. Certificate	of Status Desired		\$8.75 Add Fee Require	ditional d
	6. Name	and Address of Curre	ent Registe	ered Agent			7. Name and	Address of New Re	egistered	Agent	
EEDMINI EDANGISCA						Name					
FERMIN, FRANCISCA 17274 SW 36 AVE RD OCALA, FL 34473						Street Address	(P.O. Box Number	er is Not Acceptable)	-	
					!	City			FL	Zip Cod	e
8. The above the obligat	named entity	y submits this statemer tered agent.	nt for the pu	rpose of changing its	registere	ed office or registe	ered agent, or bo	th, in the State of Flo		familiar with,	and accept
SIGNATURE_	Signature, typed	or printed name of registered as	pent and title if	Applicable (NOT)	E: Registere	d Agent signature require	ad when reinstation)		DATE		

		FEE IS \$150.00 8 Fee will be \$55	60.00	9. Election Campa Trust Fund Cont	ign Finar		5.00 May Be ded to Fees			<u>.</u>	
	ay 1, 2008			9. Election Campa Trust Fund Cont	ign Finar		ded to Fees	CHANGES TO OFFI	CERS AND	DIRECTOR.	S IN 11
After Ma	PS	OFFICERS A		9. Election Campa Trust Fund Cont	ign Finar ribution.	Add	ded to Fees	CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11
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I nereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119. Horida 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 eath; 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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR