

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000006706

**FILED**  
**Oct 22, 2004**  
**Secretary of State**

**Entity Name:** DOODLEBUGS CHILDCARE FACILITY, INC.

**Current Principal Place of Business:**

3512 DEPEW CIRCLE  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

3505 DEPEW CIRCLE  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

3512 DEPEW CIRCLE  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

3505 DEPEW CIRCLE  
PORT CHARLOTTE, FL 33952

**FEI Number:** 65-1076634

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NUZUM, DIANE  
3512 DEPEW CIRCLE  
PORT CHARLOTTE, FL 33952 US

**Name and Address of New Registered Agent:**

NUZUM, DIANE  
3505 DEPEW CIRCLE  
PORT CHARLOTTE, FL 33952 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: DIANE NUZUM

10/22/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NUZUM, DIANE  
Address: 3269 CONWAY BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete  
Name: NUZUM, HALEY  
Address: 689 ENNIS TERR  
City-St-Zip: PT CHARLOTTE, FL 33948

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE NUZUM

DIRE

10/22/2004

Electronic Signature of Signing Officer or Director

Date