

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

06 JUN 26 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P01000049059**

1. Corporation Name

TELE-TOTS CHILDCARE, INC.

2. Principal Office Address

724 N HASTINGS STREET

Suite, Apt. #, etc.

3. Mailing Office Address

112 ALEXANDRA PLACE DR

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip Country

32808

City & State

APOPKA FL

Zip Country

32712

4. Date Incorporated or Qualified
To Do Business in Florida

5/16/2001

5. FEI Number

59-3718896

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

LYSANDER THORPE

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

6327 PINEY GLEN LN

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32819

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

Date

6/6/06

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	VERNITA STEELE	112 ALEXANDRA PLACE DR	APOPKA, FL 32712
	flgls		

300077159513
07/07/06-01052-009 **450.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/6/06

Date

Daytime Phone #

June 5, 2006

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

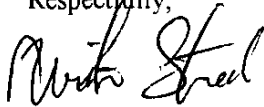
Dear Sirs:

Re: (Tele-Tots Childcare, Inc.)
Document No. P01000049059

We enclose herewith the Uniform Business Report reinstatement for the year 2004, 2005 and 2006 along with the fee of four Hundred and Fifty Dollars (\$450.00). Our mail was rerouted incorrectly, and we never received our Uniform Business Report. Our Accountant recently made us aware that we had not submitted our Uniform Business Report for the years, which we enclose.

We realize that this report is late in coming and request an abatement of any associated penalties. Again, we apologize for the delay.

Respectfully,

A handwritten signature in black ink, appearing to read "Vernita Steele", is written over the word "Respectfully,".

Vernita Steele
President