

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90089 007 ***150.00

DOCUMENT # P02000019197

1. Entity Name

WATERFORD LAKES KIDS ACADEMY, INC.



Principal Place of Business

1100 SOUTH ORANGE AVE
ORLANDO FL 32806

Mailing Address

1100 SOUTH ORANGE AVE
ORLANDO FL 32806

2. Principal Place of Business

12800 Waterford Lks Pkwy

3. Mailing Address

(Same as #2)



MOORE

CR2E034 (11/03)

City & State

Orlando Florida

City & State

Orlando Florida

4. FEI Number

35-2162199

Applied For

Not Applicable

Zip

32828

Country

Orange

Zip

32828

Country

Orange

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

IRWIN, ROBERT E
1100 SOUTH ORANGE AVE
ORLANDO FL 32806

7. Name and Address of New Registered Agent

Name **R. Jeffrey Irwin**

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

12800 Waterford Lakes Pkwy

0

City **Orlando**

FL

32828

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

R. Jeffrey Irwin **R. Jeffrey Irwin President**

1/20/04

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	DP	<input type="checkbox"/> Delete
NAME	IRWIN, R. JEFFREY	
STREET ADDRESS	1100 SOUTH ORANGE AVE	
CITY - ST - ZIP	ORLANDO FL 32806	
TITLE	DTS	<input type="checkbox"/> Delete
NAME	IRWIN, ROBERT E	
STREET ADDRESS	1100 SOUTH ORANGE AVE	
CITY - ST - ZIP	ORLANDO FL 32806	
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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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:

R. Jeffrey Irwin **R. Jeffrey Irwin**

1/20/04

407-658-4748

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #