

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034025

FILED  
Jun 21, 2005  
Secretary of State

Entity Name: IN THE BEGINNING FAMILY CHILDCARE INC.

## Current Principal Place of Business:

2753 BISHOP LANE  
DELTONA, FL 32725

## New Principal Place of Business:

1409 NORTH PINE HILLS ROAD  
ORLANDO, FL 32808

## Current Mailing Address:

2753 BISHOP LANE  
DELTONA, FL 32725

## New Mailing Address:

P.O. BOX 585843  
ORLANDO, FL 32858

FEI Number: 02-0582996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHEFFIELD, JOAN  
2753 BISHOP LANE  
DELTONA, FL, FL 32725 US

## Name and Address of New Registered Agent:

SHEFFIELD, JOAN  
~~P.O. BOX 585843~~ 1409 NORTH PINE HILLS ROAD  
~~ORLANDO, FL, FL 32858~~ US ORLANDO, FL 32808

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:

06/21/2005

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: P ( ) Delete  
Name: SHEFFIELD, JOAN  
Address: 2753 BISHOP LANE  
City-St-Zip: DELTONA, FL 32725

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHEFFIELD, JOAN  
Address: P.O. BOX 585843  
City-St-Zip: ORLANDO, FL 32858

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: JOAN SHEFFIELD

P

06/21/2005

Electronic Signature of Signing Officer or Director

Date

REGISTERED AGENT CORRECTED TO A FL. STREET

ADDRESS ON 5/19/06 SPT