

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080056

Entity Name: BEST NANNY 4 U, INC.

FILED
May 03, 2009
Secretary of State

Current Principal Place of Business:

PO BOX 718
SILVER SPRINGS, FL 344890718

New Principal Place of Business:

718-3050 NE 55TH AVE
SILVER SPRINGS, FL 34489 US

Current Mailing Address:

PO BOX 718
SILVER SPRINGS, FL 344890718

New Mailing Address:

FEI Number: 03-0476122 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIDAL, ALBERT J
421 S. PINE AVE
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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: _____

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: BYRD, DANIEL B
Address: PO BOX 718
City-St-Zip: SILVER SPRINGS, FL 344890718

Title: D () Delete
Name: BYRD, BRENDA J
Address: PO BOX 718
City-St-Zip: SILVER SPRINGS, FL 344890718

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 exemption stated in Chapter 119, 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: BRENDA BYRD

D

05/03/2009

Electronic Signature of Signing Officer or Director

Date