

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098036

Entity Name: KINDER CARE SERVICES INC.

FILED
Sep 13, 2009
Secretary of State

Current Principal Place of Business:

6420 FLETCHER STREET
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

8618 S. SUTTON DR.
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 27-0067090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAINWRIGHT, DAILE
8618 S SUTTON DR
HOLLYWOOD, FL 33025 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WAINWRIGHT, DAILE
Address: 8618 S. SUTTON DR.
City-St-Zip: MIRAMAR, FL 33025

Title: VD () Delete
Name: WAINWRIGHT, DEVON
Address: 8618 S. SUTTON DR.
City-St-Zip: MIRAMAR, FL 33025

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: DAILE WAINWRIGHT

PD

09/13/2009

Electronic Signature of Signing Officer or Director

Date