2004 FOR PROFIT CORPORATION ANNUAL REPORT

4/30/

FILED
Jun 18, 2004 8:00 am
Secretary of State
04-30-2004 90213 028 ***150.00

DOCUMENT # P03000110934

1. Entity Name
ADVENTURE BAY EARLY LEARNING CENTER OF CORAL SPRINGS, INC.

Principal Place of Business	Mailing Address
4400 WEST SAMPLE ROAD STE 116 COCONUT CREEK, FL 33073	4400 WEST SAMPLE ROAD STE 116 COCONUT CREEK, FL 33073

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

[redacted]

04062004 Chg-P CR2E034 (10/03)

4. FEI Number 83-0377314 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KELLY, JOHN P 2601 EAST OAKLAND PARK BLVD STE 208 FT LAUDERDALE, FL 33306	Name: Lenore S. Green Street Address (P.O. Box Number is Not Acceptable): 4400 W. Sample Road City: Coconut Creek FL Zip Code: 33073

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 Lenore S. Green - Lenore S. Green 4-16-04
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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREEN, LENORE S 4400 WEST SAMPLE ROAD STE 116 COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREEN, PHILIP C 4400 WEST SAMPLE ROAD STE 116 COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOLD, CHERYL K 4400 WEST SAMPLE ROAD STE 116 COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 Lenore S. Green - Lenore S. Green 4-16-04 954-972-6221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #