

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000152874

Entity Name: WEE KARE CENTER, INC.

FILED  
Feb 18, 2005  
Secretary of State

## Current Principal Place of Business:

671 SANDY NECK LANE, STE 202  
ALTAMONTE SPRING, FL 32714

## New Principal Place of Business:

34 N. PINE HILLS RD  
ORLANDO, FL 32808

## Current Mailing Address:

671 SANDY NECK LANE, STE 202  
ALTAMONTE SPRING, FL 32714

## New Mailing Address:

2931 MARY CHURCH CT  
ORLANDO, FL 32811

FEI Number: 20-0492856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, GEORGE T  
671 SANDY NECK LANE, STE 202  
ALTAMONTE SPRING, FL 32714 US

## Name and Address of New Registered Agent:

WILLIS, SHIWILA  
2931 MARY CHURCH CT  
ORLANDO, FL 32811 US

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: SHIWILA WILLIS

02/18/2005

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: BROWN, GEORGE T  
Address: 671 SANDY NECK LANE, STE 202  
City-St-Zip: ALTAMONTE SPRING, FL 32714

Title: ST ( ) Delete  
Name: THORNTON, SHIWILA W  
Address: 671 SANDY NECK LANE, STE 202  
City-St-Zip: ALTAMONTE SPRING, FL 32714

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BROWN, GEORGE T  
Address: 2931 MARY CHURCH CT  
City-St-Zip: ORLANDO, FL 32811

Title: VP (X) Change ( ) Addition  
Name: WILLIS, SHIWILA M  
Address: 2931 MARY CHURCH CT  
City-St-Zip: ORLANDO, FL 32811

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: SHIWILA WILLIS

VP

02/18/2005

Electronic Signature of Signing Officer or Director

Date