

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098297

FILED  
Feb 24, 2006  
Secretary of State

Entity Name: CHILDREN'S ART ENRICHMENT, INC.

## Current Principal Place of Business:

8655-115TH AVE. NORTH  
LARGO, FL 33773

## New Principal Place of Business:

3470 WEST WARBLER ST.  
LECANTO, FL 34461

## Current Mailing Address:

8655-115TH AVE. NORTH  
LARGO, FL 33773

## New Mailing Address:

3470 WEST WARBLER ST.  
LECANTO, FL 34461

FEI Number: 20-3153002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GYORKE, KRISTA M.  
8655-115TH AVE. NORTH  
LARGO, FL 33773 US

## Name and Address of New Registered Agent:

BARBER, JENNIFER L  
3470 WEST WARBLER ST.  
LECANTO, FL 34461 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: JENNIFER L. BARBER

02/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GYORKE, KRISTA M.  
Address: 8655-115TH AVE. NORTH  
City-St-Zip: LARGO, FL 33773

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P ( ) Change (X) Addition  
Name: BARBER, JENNIFER L  
Address: 3470 WEST WARBLER ST.  
City-St-Zip: LECANTO, FL 34461

I hereby certify that the information supplied with this filing does not qualify for the 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: JENNIFER L BARBER

P

02/24/2006

Electronic Signature of Signing Officer or Director

Date