

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104402

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: GUARDIAN ANGELS CHILDCARE CENTER INC.

**Current Principal Place of Business:**

100 DR. MARTIN LUTHER KING AVE.  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

100 DR. MARTIN LUTHER KING AVE.  
WILDWOOD, FL 34785

**New Mailing Address:**

FEI Number: 20-3335846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEWIS LYALS, GWENDOLYN  
15444 SW 34TH COURT RD  
OCALA, FL 34473 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: LEWIS LYALS, GWENDOLYN  
Address: 15444 SW 34TH COURT RD  
City-St-Zip: OCALA, FL 34473

Title: VP ( ) Delete  
Name: BROWN, LOUIS JR.  
Address: 6949 ROSS TERRACE  
City-St-Zip: HOLDER, FL 34445

Title: TS ( ) Delete  
Name: LEWIS LYALS, GWENDOLYN  
Address: 15444 SW 34TH COURT RD  
City-St-Zip: OCALA, FL 34473

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: LOUIS J BROWN

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date