

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000132666

FILED
May 04, 2008
Secretary of State

Entity Name: THE CHILDREN'S CORNER OF FORT MYERS, INC.

Current Principal Place of Business:

13451 MCGREGOR BLVD
SUITE 12
FT MYERS, FL 33919

New Principal Place of Business:

6180 WINKLER ROAD
FORT MYERS, FL 33919

Current Mailing Address:

PO BOX 07493
FT MYERS, FL 33919 04

New Mailing Address:

6180 WINKLER ROAD
FT MYERS, FL 33919 04

FEI Number: 20-3567349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELCHER, W. GUS II
1375 JACKSON ST
STE 303
FT MYERS, FL 33901 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

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: D () Delete
Name: BELCHER, PAMELA G
Address: PO BOX 07493
City-St-Zip: FT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BELCHER, PAMELA G
Address: 6180 WINKLER ROAD
City-St-Zip: FT MYERS, FL 33919

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: PAMELA G. BELCHER

PRES

05/04/2008

Electronic Signature of Signing Officer or Director

Date