2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2006
Secretary of State

DOCUMENT# P05000148870

Entity Name: PEPPERS TRIPOD DAYCARE CENTERS, INC.

Current Principal Place of Business:

P.O. BOX 673
LIVE OAK, FL 32064

New Principal Place of Business:

202 W DUVAL STREET
LIVE OAK, FL 32064

Current Mailing Address:

P.O. BOX 673
LIVE OAK, FL 32064

New Mailing Address:

202 W DUVAL STREET
LIVE OAK, FL 32064

FEI Number: 71-0991953 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETTREY, SADIE
14293 111TH PL
MCALPIN, FL 32062 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: P ( ) Delete
Name: PEPPERS, EVELYN
Address: 9449 CNTY RD 49
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: EVELYN PEPPERS PRES 05/14/2006
Electronic Signature of Signing Officer or Director Date