

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000168339

Entity Name: WINTER SPRINGS CHILD CARE, INC.

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

6 N. DEVON AVENUE
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

6 N. DEVON AVENUE
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 59-3828749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLAONIYE, AYO O
5944 LAKE CHAMPLAIN DRIVE
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

OLAONIYE, AYO O
3113 TWISTED OAK LOOP
KISSIMMEE, FL 34744 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:

Electronic Signature of Registered Agent

04/17/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OLAONIYE, AYO O
Address: 5944 LAKE CHAMPLAIN DRIVE
City-St-Zip: ORLANDO, FL 32829 OR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OLAONIYE, AYO O P
Address: 3113 TWISTED OAK LOOP
City-St-Zip: KISSIMMEE, FL 34744 OR

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: AYO OLAONIYE

Electronic Signature of Signing Officer or Director

P

04/17/2006

Date