

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000018365

FILED
Apr 02, 2009
Secretary of State

Entity Name: BAREFOOT BUSY NURSERY, INC.

Current Principal Place of Business:

1580 E. 40TH TERR. SW
NAPLES, FL 34116

New Principal Place of Business:

1580 E. 40TH TERR. SW
SUITE E
NAPLES, FL 34116

Current Mailing Address:

1580 E. 40TH TERR. SW
NAPLES, FL 34116

New Mailing Address:

1580 E. 40TH TERR. SW
SUITE E
NAPLES, FL 34116

FEI Number: 20-4469489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUINN, JEFFREY C
307 AIRPORT ROAD NORTH
NAPLES, FL 34104 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: P () Delete
Name: WILLIAMS, ROBERT
Address: 1580 E. 40TH TERR. SW
City-St-Zip: NAPLES, FL 34116

Title: VP () Delete
Name: COBB, JERELYN
Address: 1580 E. 40TH TERR. SW
City-St-Zip: NAPLES, FL 34116

Title: S (X) Delete
Name: WILLIAMS, SERENA
Address: 1580 E. 40TH TERR. SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, ROBERT E
Address: 1580 40TH TERR. SW SUITE E
City-St-Zip: NAPLES, FL 34116

Title: VP (X) Change () Addition
Name: COBB, JERELYN
Address: 1580 40TH TERR. SW SUITE E
City-St-Zip: NAPLES, FL 34116

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: ROBERT E. WILLIAMS

P

04/02/2009

Electronic Signature of Signing Officer or Director

Date