

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000065898

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** AUNT DELORES' CHILD CARE, INC.

**Current Principal Place of Business:**

1411 MELANIE DRIVE  
ORLANDO, FL 32825

**New Principal Place of Business:**

**Current Mailing Address:**

1411 MELANIE DRIVE  
ORLANDO, FL 32825

**New Mailing Address:**

**FEI Number:** 20-4885702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MYERS, TONIA  
1411 MELANIE DRIVE  
ORLANDO, FL 32825 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:** PSD  
**Name:** MYERS, TONIA  
**Address:** 1411 MELANIE DRIVE  
**City-St-Zip:** ORLANDO, FL 32825

**Title:** VTD  
**Name:** MYERS, LAWRENCE III  
**Address:** 1411 MELANIE DRIVE  
**City-St-Zip:** ORLANDO, FL 32825

I hereby 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 all other like empowered.

**SIGNATURE:** TONIA MYERS

OWNE

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date