## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED
Jun 27, 2007 8:00 am
Secretary of State
05-07-2007 90063 011 \*\*\*150.00

5/7

DOCUMENT # P06000098029  1. Entity Name A BRIGHTER BEGINNING EARLY CHILDHOOD CENTER INC.								03-07-200	07 90063 011	****150.00
Principal Place 8621 N. MUL TAMPA, FL 3	BERRY STR		Meiling Address 8621 N. MULBERRY STREET TAMPA, FL 33604					66019	) 869 M. Corr Hall Jan et Cor	1111 (8 <b>40</b> 14, 1) (874
2. Principal Pl	ace of Busin	ness - No P.O. Box #	3. Mailing Address				- <b>          </b>			
Suite, Apt. #. etc.			Suite, Apt. #, etc.				0420200	7 Chg-P	CR2E034 (12/	706)
City & State			City & State				35%	551907	33	Applied For Not Applicable
Zip	Country		Zip			try	. J	ite of Status Desired	Fea Re	Additional quired
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name				
PRINCE, DAVID E 4519 ASHMORE DR						Street Address	s (P.O. Box Nurr	nber is Not Acceptabl	ie)	
TAMPA, FL	. 33610									
						City			FL Zip	Code
8. The above named entity submits this statement for the purpose of changing its pegistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registrified agent.										
SIGNATURE Sopriture, hyped or printed name of replacement agent and site if applicable (NOTE: Regulated Agent significant required when i structure)  DATE										
FILE NOWILL FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5,00 May Be  Trust Fund Contribution.   Added to Fees										
10.	5	OFFICERS AND			11.		, <u> </u>	S/CHANGES TO OFF		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the sectiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if										
changed, or on an attachinent with an address, with all other like empowered 4 30107 91371007917										
SIGNATURE: UT OUT ON TOUR TOUR STORY										