

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108205

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** SMART START CHILDCARE AND ACADEMY, INC.

**Current Principal Place of Business:**

10662 S. FEDERAL HWY.  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

10696 S. FEDERAL HWY.  
SUITE C  
PORT ST. LUCIE, FL 34952

**Current Mailing Address:**

10662 S. FEDERAL HWY.  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

10696 S. FEDERAL HWY.  
SUITE C  
PORT ST. LUCIE, FL 34952

**FEI Number:** 02-0784519

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GREEN, GERALD G DR.  
10662 S. FEDERAL HWY.  
PORT ST. LUCIE, FL 34952 US

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

GREEN, GERALD G DR.  
10696 S. FEDERAL HWY.  
SUITE C  
PORT ST. LUCIE, FL 34952 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:**

04/27/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: GREEN, GERALD G  
Address: 2613 SW ACCO RD.  
City-St-Zip: PT. ST. LUCIE, FL 34953

Title: VPS  
Name: GREEN, NOVLET L  
Address: 2613 SW ACCO RD.  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D  
Name: GREEN, TAVAIN K  
Address: 2613 SW ACCO ROAD  
City-St-Zip: PORT ST LUCIE, FL 34953

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:** GERALD G GREEN

PT

04/27/2010

Electronic Signature of Signing Officer or Director

Date