

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000124118

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** BRIGHT STARS CHILD DEVELOPMENT CENTER INC

**Current Principal Place of Business:**

2425 SPOONWOOD DRIVE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 180128  
TALLAHASSEE, FL 32318

**New Mailing Address:**

**FEI Number:** 51-0659350

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTIN-HUMES, LUISA PRESIDE  
9157 OLD CHEMONIE ROAD  
TALLAHASSEE, FL 32309 US

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

MARTIN-HUMES, LUISA PRESIDE  
2425 SPOONWOOD DRIVE  
TALLAHASSEE, FL 32303 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: DR. LUISA MARTIN-HUMES

01/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MARTIN-HUMES, LUISA DR.  
Address: 2425 SPOONWOOD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD  
Name: MARTIN, CANDICE MS.  
Address: 9725 SOUTHWEST 138TH AVENUE  
City-St-Zip: MIAMI, FL 33186

Title: VD  
Name: HUMES, CRAIG MR.  
Address: 9157 OLD CHEMONIE ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

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: DR. LUISA MARTIN-HUMES

PRES

01/07/2011

Electronic Signature of Signing Officer or Director

Date