

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000010710

FILED
Oct 06, 2009
Secretary of State

Entity Name: AMANDA'S CHILDCARE AND PRESCHOOL INC

Current Principal Place of Business:

123 W. RHODE ISLAND AVE.
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

123 W. RHODE ISLAND AVE.
ORANGE CITY, FL 32763

New Mailing Address:

125 BUFORD AVE
ORANGE CITY, FL 32763

FEI Number: 26-1933488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNECK, JOSEPH W
465 MCGREGOR RD
DELAND, FL 32720 US

Name and Address of New Registered Agent:

CATERINY, MICHAEL J
125 BUFORD AVE
ORANGE CITY, FL 32763 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: MICHAEL J CATERINY

10/06/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CORNECK, AMANDA
Address: 465 MCGREGOR RD
City-St-Zip: DELAND, FL 32720

Title: VP () Delete
Name: CORNECK, JOSEPH W
Address: 465 MCGREGOR RD
City-St-Zip: DELAND, FL 32720

Title: T () Delete
Name: CATERINY, MICHAEL J
Address: 125 BUFORD AVE
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL J. CATERINY

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10/06/2009

Electronic Signature of Signing Officer or Director

Date