

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000004484

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Entity Name:** PROMISELAND CHRISTIAN CHILDCARE INC.

**Current Principal Place of Business:**

1548 W 26TH ST  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

1548 W 26TH ST  
JACKSONVILLE, FL 32209

**New Mailing Address:**

**FEI Number:** 90-0536294

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LECOUNT, ROBERT JR.  
1548 W 26TH ST  
JACKSONVILLE, FL 32209 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

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  
Name: LECOUNT, ROBERT JR  
Address: 1548 W 26TH ST  
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP  
Name: LECOUNT, DIANE  
Address: 1548 W 26TH ST  
City-St-Zip: JACKSONVILLE, FL 32209

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:** ROBERT LECOUNT JR.

P

05/01/2010

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

\_\_\_\_\_  
Date