

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000007935

Entity Name: WEE KIDS OF PASCO, INC.

FILED
Jul 16, 2008
Secretary of State

Current Principal Place of Business:

8828 EASTHAVEN CT.
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

8828 EASTHAVEN CT.
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 59-3159067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAHS, LYNN A
8841 MARTINIQUE LANE
PORT RICHEY, FL 34668 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: PT () Delete
Name: MAHS, LYNN A.
Address: 8841 MARTINIQUE LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: VS () Delete
Name: POPIELASKI, KATHLEEN C.
Address: 9436 VIA SEGOVIA
City-St-Zip: NEW PORT. RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LYNN MAHS

PRES

07/16/2008

Electronic Signature of Signing Officer or Director

Date