## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000031598 (4)

EARLY TIMES PRESCHOOL & DAY CARE, INC.

Principal Place 2510 DAVIS E NAPLES FL 3: US	BLVD.	Mailing Address 2510 DAVIS BLVD. NAPLES FL 33962 US		3. Date Incorporated or Qualified			
00							
Principal Place of Business		2a. Mailing Address 26		4. FEI Number Applied For 65-0418331 Not Applicat		Applied For Not Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ <b>\$</b>	<b>8.75</b> Additional Fee Required
City & State		City & State	harman and a second a second and a second an		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Ζφ <b>24</b>	Country 25	Ζφ <b>29</b>	Coun	try	8. This corporation has liability for Florida Statutes	intangible tax un \ No	iders 199.032,
	9. Name and Address of Curre	ent Registered Agent		31 Name	10. Name and Address of New R	legistered Age	nt
HAAR R	ONALD A.						
2510 DAVIS BLVD.			1	Street Addr	ress (P.O. Box Number is Not Acceptat	de)	'
	FL 33942		1	83			
			-	B4 City			5 Zip Code
			L			PL.	
or register	ed agent, or both, in the State of Flo	orida. Such change was authoriz	ed by the co	e-named corpo: prporation's boa	ration submits this statement for the pur ird of directors. Thereby accept the app	rpose of changir ointment as regi	ig its registered office   istered agent. I am
	th, and accept the obligations of, Se	ction 607.0505, Florida Statutes	<b>5</b> .				
SIGNATURE	Signature, typed or printed name of registered age	ent and title Lapplicable; (NC	TE: Registered A	kgent signature require	d when reinstating)	DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIF	RECTORS IN 12
TITLE	P	☐ DELETE	זון 1	LE		□ c	hange 🔲 Addition
NAME	HAAR, RONALD A		1 2 NA				
STREET ADDRESS	2510 DAVIS BLVD.			EET AODRESS			
CITY-ST-ZIP	NAPLES FL 33942	ET DELETE		Y-SI-ZIP			hange
TITLE	SPEERS, CYNTHIA A	DELETE	2 1 TII 2 2 NAJ				Trange T Madicion
NAME STREET ADDRESS	2510 DAVIS BLVD.			KEET ADDRESS			
CITY-ST-7IP	NAPLES FL 33942			Y-S1-ZIP			
TITLE	ST	DELETE	3. 1 1/1				hange Addition
NAME	HAAR, KATHERINE N	<del>-</del> · ·	3.2 NA	ME	•		
STREET ADDRESS	2510 DAVIS BLVD.		3.3 \$1	RSET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33942		3.4 CH	Y-S1-ZIP			
TITLE		☐ DELFIE	4. 1 Til	LE		□ c	hange 🔲 Addition
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CITY-ST-ZIP				Y-ST-ZIP			
TITLE		DEFELE	5 1 TI			□ c	hange 🔲 Addition
NAME			5 2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		First Religion		Y - ST - ZIP			Shonga T Addis-
TITLE		☐ DELETE	6 1 T(	1		[_] C	change
NAME			6 2 NA				
STREET ADDRESS	1		6.3 ST	REET ADDRESS			

6.4.CITY-ST-ZIP

1.1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 13 if changed, or on an attachment with an address.

SIGNATURE: Hatheway N. Haar of Signing Officer on Directo

5/8/96 (941) 774-2674

A FRANCO NO TREA CON CONTRACTOR C

CR2E034 (12/95)