

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 7:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000079433 (6)

1. Corporation Name

GREAT BEGINNINGS, INC.

Principal Place of Business

696 1ST AVE. NORTH
SUITE 201
ST. PETERSBURG FL 33701-3610

Mailing Address

696 1ST AVE. NORTH
SUITE 201
ST. PETERSBURG FL 33701-3610

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/28/1994

3a. Date of Last Report

N/A

4. FEI Number

65-0532628

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.092,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

#2002

2a. Mailing Address

8466 N. LOCKWOOD RIDGE RD.

21. Suite, Apt. #, etc

#2002

26. Suite, Apt. #, etc

#318

23. City & State

SARASOTA, FL

28. City & State

SARASOTA, FL

24. Zip

34243

Country

MANATEE

29. Zip

34243

Country

MANATEE

9. Name and Address of Current Registered Agent

SKLAVER, RONALD L
696 1ST AVE. NORTH
SUITE 201
ST PETERSBURG FL 33701-3610

10. Name and Address of New Registered Agent

81. Name

RONALD L. SKLAVER

82. Street Address (P.O. Box Number is Not Acceptable)

8307 62ND STREET COURT EAST, # 2002

83.

84. City

SARASOTA

FL

85. Zip Code

34243

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ronald L. Sklaver

RONALD L. SKLAVER

4/23/95

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DPST
SKLAVER, RONALD L
696 1ST AVE. NORTH, STE. 201
ST PETERSBURG FL 33701-3610

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Sections 119.07(2)(b), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ronald L. Sklaver

RONALD L. SKLAVER

4/23/95

(813) 358-9236

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR