## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE NAME

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Change

Change

Change

☐ Change

Addition

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Addition

Addition

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000029077 (1)

A & A BABY & TODDLER RENTALS, INC.

Principal Plac	on of Business	Mailing Address					
			_				
7548 COVE TERRACE 7548 COVE TERRACE SARASOTA FL 34231 SARASOTA FL 34231							
US US					DO NOT WRITE IN THIS SPACE		
		**			3. Date Incorporated or Qualified		
					04/10/1995		
2. Principal Place of Business 2a. Mailing Address				<del></del>	4. FEI Number	Applied For	
21		26	26		65-0573282	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required		
22		27	27				
City & State		City & State	City & State		6. Election Campaign Financing \$5	.00 May Be	
23		28				Added to Fees	
Zip	Country	Zip	Co	ountry	8. This corporation owes or has paid the current year	ar Intangible	
24	25	29	30		Porsonal Property Tax due June 30. Yes	□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
6624 GATEWAY AVENUE SARASOTA FL 34231				82 Street Address (P.O. Box Number is Not Acceptable) 83			
				84 City	FL   "	Zip Code	
11. Pursuant office or agent. I s	to the provisions of Sections 607, registered agent, or both, in the Sam familiar with, and accept the of	0502 and 607, 1508, Florida State of Florida Such change wo oligations of, Section 607, 0505,	atutes, the as authoriz , Florida St	above-named co red by the corpor latutes	rporation submits this statement for the purpose of chang ation's board of directors. I hereby accept the appointmen	ing its registered nt as registered	
SIGNATURE							
Signature, typed or printed move of registered agent and title if applicable (NOTE: 12. OFFICERS AND DIRECTORS					uired when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECT	TODO IN 10	
TITLE	P DELETE		13	TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition		
	_ ·				Citi	mgc Mudition	
NAME KELEIGH, WENDELL				NAME			
STREET ADDRESS 7548 COVE TERRACE				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	S DELETE		2.1	2.1 TITLE Change		nge [_] Addition	
NAME	KELEIGH, WENDELL		2.2	NAME			
STREET ADDRESS	5748 COVE TERRACE		2.3	STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL		2.4	CITY-S1-ZIP			

3.3 STREET ADDRESS 3.4. CITY - ST - ZIP

4.3 STREET AODRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY - ST - ZIP

3.1 TITLE 3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

6.4 CITY-ST-ZIP CHTY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

Kolestulatell Prosta 1-17-99 227(-166-140