

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # P95000055920 (9)**

1. Corporation Name

**PROFESSIONAL CHILD CARE, INC.**



Principal Place of Business

**856 105 AVE. NORTH  
NAPLES FL**

Mailing Address

**856 105 AVE. NORTH  
NAPLES FL**

3. Date Incorporated or Qualified

**07/17/1995**

3a. Date of Last Report

**NA**

2. Principal Place of Business

21 **2737 Bayshore Dr.**  
Suite, Apt. #, etc.

22 **Naples, FL**  
City & State

23 **33962**  
Zip

2a. Mailing Address

26 **Your Child Care**  
Suite, Apt. #, etc.

27 **2737 Bayshore Dr.**  
City & State

28 **Naples, FL**  
City & State

29 **33962**  
Zip

30 **Collier**  
Country

4. FEI Number

**65-0599602**

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. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**LURIE, TERRY A  
2430 SHADOWLAWN DR., STE. 18  
NAPLES FL 33962**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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

Signature typed or printed name of registered agent and if not applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE ☐ DELETE

NAME **D  
DEPETRO, JENNY P**  
STREET ADDRESS **856 105 AVE. NORTH  
NAPLES FL 33963**

11.2 TITLE ☐ DELETE

NAME **Vice President,  
Lisa Prue**  
STREET ADDRESS **856 105th Ave. N.**  
CITY-STATE-ZIP **Naples, FL 33962**

11.3 TITLE ☐ DELETE

NAME **D  
Karl Prue**  
STREET ADDRESS **856 105th Ave N.**  
CITY-STATE-ZIP **Naples, FL 33962**

11.4 TITLE ☐ DELETE

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

11.5 TITLE ☐ DELETE

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

11.6 TITLE ☐ DELETE

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

NAME **President  
DePetro, Jenny P.**  
STREET ADDRESS **2010 River Reach Dr. #162**  
CITY-STATE-ZIP **Naples, FL 33964**

13.2 TITLE ☐ Change ☐ Addition

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

13.3 TITLE ☐ Change ☐ Addition

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

13.4 TITLE ☐ Change ☐ Addition

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

13.5 TITLE ☐ Change ☐ Addition

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

13.6 TITLE ☐ Change ☐ Addition

NAME **D**  
STREET ADDRESS **D**  
CITY-STATE-ZIP **D**

14. I 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Jenny Prue Depetro** **Jenny Prue Depetro**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-28-96**  
Date

**774-5858**  
Daytime Phone #

CR2E034 (12/95)