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FILED

Apr 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000017615 (1)

1. Corporation Name

IT'S BEDTIME INC.

Principal Place of Business

1957 W LUMSDEN  
BRANDON CENTER SOUTH  
BRANDON FL 33511

Mailing Address

1957 W LUMSDEN  
BRANDON CENTER SOUTH  
BRANDON FL 33511-8820

3. Date Incorporated or Qualified

02/26/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-3335300

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

DEVENGENCIE-GAY, PAMELA  
1957 W LUMSDEN  
BRANDON CENTER SOUTH  
BRANDON FL 33511

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GAY, RONALD D  
STREET ADDRESS 4803 GOLD BUD LN  
CITY-ST-ZIP TAMPA FL 33624

TITLE D ☐ DELETE

NAME DEVENGENCIE-GAY, PAMELA  
STREET ADDRESS 4803 GOLD BUD LN  
CITY-ST-ZIP TAMPA FL 33624

TITLE D ☐ DELETE

NAME DEVENGENCIE, JAMES  
STREET ADDRESS 751 10 STREET E #409  
CITY-ST-ZIP PALMETTO FL 34221

TITLE D ☐ DELETE

NAME DEVENGENCIE, JAMES  
STREET ADDRESS 751 10 STREET E #409  
CITY-ST-ZIP PALMETTO FL 34221

TITLE D ☐ DELETE

NAME DEVENGENCIE, CAROL  
STREET ADDRESS 751 10 STREET E #409  
CITY-ST-ZIP PALMETTO FL 34221

TITLE D ☐ DELETE

NAME KOON, MARK  
STREET ADDRESS 8310 CANDLEMAKER CT  
CITY-ST-ZIP TAMPA FL 33615

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME GAY, RONALD D  
1.3 STREET ADDRESS 4103 CONCORD WAY  
1.4 CITY-ST-ZIP Plant City, FL 33567

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Devengencie-Gay, Pamela  
2.3 STREET ADDRESS 4103 CONCORD WAY  
2.4 CITY-ST-ZIP Plant City, FL 33567

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby 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.

SIGNATURE [Signature]

CP2E034 (9/96)