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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000098209 (5)

HAPPY APPLE PRE-SCHOOL, INC.

FILED Apr 07 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			L emmirmat eif tittid finter dortt autet autet marie surer tutif tiffir auren tutif	
2975 OVER	SÉAS HIGHWAY	2975 OVERSEAS HIGHW	2975 OVERSEAS HIGHWAY			
MARATHON	Fi. 33050	MARATHON FL 33050				
	<u>.</u>				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
<b>A B</b> /	40 40				12/02/1996	
	age of Business	2a. Mailing Address			4. FEI Number Applied For	
21 Suite Ant	# ato	Suite Ant # ate			<b>65-0719935</b> Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5, Certificate of Status Desired Fee Required	
22 City & State		City & State				
23		——————————————————————————————————————			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees	
Zip	Country					
24	25	29 30		y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
V	ILLER, ROBERT K ESO.		B1	Name	10, 10, 10, 10, 10, 10, 10, 10, 10, 10,	
	978 OVERSEAS HIGHWAY					
	ARATHON FL 33050		82 Street Address (P.O. Box Number is Not Acceptable)			
M	ARATHUN PL 33030		83	<del> </del>		
			"			
			84	City	FL 85 Zip Code	
44 5		00 4 007 4500 51-14- 01-14-	43 - 45 -	<u> </u>		
office or re	io the provisions of Sections 607.051 egistered agent, or both, in the State	02 and 607.1508, Florida Statutes e of Fiorida. Such change was au	s, the abov Ithorized b	e-named i y the corp	corporation submits this statement for the purpose of changing its register poration's board of directors. I hereby accept the appointment as registere	
agent. I ar	m <b>fa</b> miliar with, and accept the oblig	ations of, Section 607.0505, Flori	ida Statute	S.	, , ,	
SIGNATURE .						
	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE:		ent signature i	required when reinstating) DATE	
12.	OFFICERS AIN	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	CHAPLIN, LAURA K		4		Change C Addi	
NAME	24 KYLE WAY WEST		1.2 NAME			
STREET ADDRESS	MARATHON FL 33050		4	T ADDRESS		
CITY-ST-ZIP	D MARATRON PL 33030	DELETE	1.4 CITY-	ST-ZIP		
TITLE	T	D SECEIE	2.1 TITLE		Change Addii	
NAME	CHAPLIN, STEPHEN B		2.2 NAME	1		
STREET ADDRESS	24 KYLE WAY WEST		2.3 STREE	TADDRESS		
CITY-ST-ZIP	MARATHON FL 33050		2. 4 CITY-	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	l	☐ Change ☐ Addi	
NAME	=		3.2 NAME			
STREET ADDRESS	,		a.3 STREE	TADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	3.4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addit	
NAME			4. 2 NAME	ĺ		
STREET ADDRESS			4.3 STREE	F ADDRESS		
CITY-ST-ZIP			4.4 CITY+	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addit	
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREE	ADDRESS		
CITY-ST-ZIP	<u> </u>		5.4 CITY-	ST-ZIP		
TITLE		☐ DELE <b>te</b>	6.1 TITLE		Change Addit	
NAME	Ů.		6.2 NAME			
STREET ADDRESS	•			ADDRESS		
CITY-SY-ZIP			6.4 CITY - 5			
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify for	the exemp	tion stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
Indicated of	on <b>this annual report or supplement</b>	al annual report is true and accur	rate and th	at my sign	nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in	
Block 12 o	r Block 13 if changed, or on an atta	chment with an address.	.00018 11118	report as i	required by enapter our, Frenda statutes, and that my name appears in	
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