

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000017623

FILED  
Feb 27, 2006  
Secretary of State

Entity Name: CREATIVE CHILD PRESCHOOL INC.

## Current Principal Place of Business:

9675 WESTVIEW DR  
CORAL SPRINGS, FL 33076

## New Principal Place of Business:

## Current Mailing Address:

150 WESTON RD  
SUNRISE, FL 33326

## New Mailing Address:

FEI Number: 65-0739572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AUFRICHTIG, JOAN  
CCLC MANAGEMENT CO FNC  
150 WESTON RD  
SUNRISE, FL 33326 US

## Name and Address of New Registered Agent:

AUFRICHTIG, JOAN  
CCLC MANAGEMENT CO INC  
150 WESTON RD  
SUNRISE, FL 33326 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOAN AUFRICHTIG

02/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: AUFRICHTIG, JOAN M  
Address: 150 WESTON RD  
City-St-Zip: SUNRISE, FL 33326

Title: P ( ) Delete  
Name: AGER, BRIAN  
Address: 150 WESTON RD  
City-St-Zip: SUNRISE, FL 33326

Title: VP ( ) Delete  
Name: AGER, EILEEN  
Address: 150 WESTON RD  
City-St-Zip: SUNRISE, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EILEEN AGER

VP

02/27/2006

Electronic Signature of Signing Officer or Director

Date