


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90217 018 \*\*\*150.00

<b>DOCUMENT # P98000003509</b> 1. Entity Name KIDDIE KAMPUS PRESCHOOL ACADEMY, INC.					
Principal Place of Business 475 MARINER BLVD SPRING HILL, FL 34609			Mailing Address 475 MARINER BLVD SPRING HILL, FL 34609		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3490197</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FEHLHABER, JANET 475 MARINER BLVD SPRING HILL, FL 34609			Name _____		
			Street Address (P.O. Box Number is Not Acceptable) _____		
			City <b>FL</b>		
			Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FEHLHABER, JANET 475 MARINER BLVD SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD SILVA, KERI A 475 MARINER BLVD SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SILVA, LORI A 475 MARINER BLVD SPRING HILL, FL 34609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <i>Jan Fehlhabe</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>4/25/06</i> Daytime Phone # <i>352-6842700</i>		



ATTACHMENT  
20037475

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 14, 2006

KIDDIE KAMPUS PRESCHOOL ACADEMY, INC.  
475 MARINER BLVD  
SPRING HILL, FL 34609

SUBJECT: KIDDIE KAMPUS PRESCHOOL ACADEMY, INC.  
Ref. Number: P98000003509

We have received your document for KIDDIE KAMPUS PRESCHOOL ACADEMY, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Although you attempted to download an annual report form, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

The fee to file the enclosed profit annual report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have any questions concerning the filing of your document, please call (850) 245-6059.

PAMELA YARBOR  
OPS

Letter Number: 106A00025558



**ATTACHMENT**  
**20037475**  
**Division of Corporations**

## 2006 Annual Report

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P98000003509
Business Entity Name	KIDDIE KAMPUS PRESCHOOL ACADEMY, INC.
Original File Date	01/12/1998

FEI Number 59-3490197  
Principal Address 475 MARINER BLVD  
SPRING HILL, FL 34609  
Mailing Address 475 MARINER BLVD  
SPRING HILL, FL 34609  
Registered Agent JANET FEHLHABER  
475 MARINER BLVD  
SPRING HILL, FL 34609 US

### Officer/Director Name And Address

PD  
JANET FEHLHABER  
475 MARINER BLVD  
SPRING HILL, FL 34609

VTD  
KERI A SILVA  
475 MARINER BLVD  
SPRING HILL, FL 34609

VSD  
LORI A SILVA  
475 MARINER BLVD  
SPRING HILL, FL 34609

If all of the above  
information is correct and  
you do not wish to make any

If you need to make changes  
to the above information,  
please select: