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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 22, 1999 8:00 am Secretary of State 07-22-1999 90013 023 ***150.00

1. Corporatio	NIENI#V P98000	0050269 🗸							
LEARNING KASTLE LAUREL DAY CARETAND PRESCHOOL, INC.					593817-90013-23 / *				
- 1.	noonoon, mot	_						·	_
Principal Plac	e of Business	Mailing Address							
101 OL	D LAUREL ROAD	6062 GILLOT	BLVD						
NOKOMI	S, FL 34274	PORT CHARLOT	TE, I	FL		DO NOT WR	ITE IN THIS	SPACE	
			3398	1	3. Date	Incorporated or Qualifed			
					06/	/03/1998			
2. Principal P	lace of Business	2a. Mailing Address			4. FEIN				olied For
21		26			65-	-0855055			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certi	fcate of Status Desired		\$8.75 A	
City & Stat		City & State		6 Flect	ion Campaign Financing		\$5.00		
23		28			1	Fund Contribution		Added.to	- 1
Zip	Country	Zip	Country		8. This	corporation owes the cur	rent year Inta		
24	25		10			onal Property Tax.	D		O∰∘
	9. Name and Address of Current I	Registered Agent	81	Name	10. Nam	e and Address of New	Registered A	Agent	
JЕ	SSICA D'URSO CORRI	ENTE		J	1.551				
10	1 OLD TRAIL ROAD		82		•	ox Number is Not Accept $\mathrm{DT}_{-}\mathrm{BLVD}_{+}$	table)		
NO	KOMIS, FL 34274		83		GILL	7 1 D 1 1.V. 17 a			_
			84	City				ge Zin C	ode.
			1			ARLOTTE	FL	85 Zip 9	
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statutes	the above	e-named cor	poration subr	nits this statement for the f directors. I hereby acce	e purpose of o	changing its to the transfer t	registered iistered
agent. I a	im familiar with, and accept the obligation	ons of, Section 607.0505, Florid	ia Statutes			• • • • • • • • • • • • • • • • • • •	1.1-	_	·
SIGNATURE	Signature, typed or printed name of registered agent a	2001C	Ogjetarod Ager	nt eigneburg peguir	ed when reinstatin	(a)	7//2/9	9	
12.	OFFICERS AND		13.	ii agriatura regon		TIONS/CHANGES TO O	FICERS AN	D DIRECTO	RS IN 12
TITLE	PRESIDENT JESSICA D'URSO (1.1 TITLE					Change	Addition
NAME	6062 GILLOT BLVI	COUVENIE	1.2 NAME						
STREET ADDRESS	PORT CHARLOTTE		1.3 STREET	TADORESS					
CITY-ST-ZIP			1.4 CITY-S	T-ZIP				["] Change	☐ Addition
TITLE	V PRES JAMES M.CORRENTI	☐ DELETE	2.1 TITLE					Change	
NAME	COCO CTITOM DIVI		2.2 NAME 2.3 STREET	TANNDESS					
STREET ADDRESS CITY-ST-ZIP	PORT CHARLOTTE		2. 4 CITY-S						
TITLE	TORT CHARDOTTE I	DELETE	3.1 TITLE	,1-21				☐ Change	Addition
NAME.	<u> </u>		3.2 NAME						
STREET ADDRESS		•	3.3 STREE	TADORESS			•		
CITY-ST-ZIP			3.4. CITY+S	T-ZIP				Change	Addition
TITLE		☐ DELETE	4.1 TITLE					☐ Change	
NAME			4. 2 NAME	TADORESS					
STREET ADDRESS			4.4 CITY-S						
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	TADDRESS					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	6.1 TITLE 6.2 NAME					☐ Change	Addition
NAME				T ADDRESS					1
STREET ADDRESS			6.4 CITY-S	1					Ì
CITY-ST-ZIP	<u></u>	this files does not qualify for t				07/2V/i) Elorida Statutos			

I 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 informalia 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, with all other like empowered.

SIGNATURE:

JESSICA CORRENTE

593817-90013-23 P98000050269

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CARBONLESS **FORM 3801**

NO CARBON REQUIRED

RAPIO LETTER

NOTE: Send White and Pink copies. Sender retains Canary copy. TRIPLICATE_

то.	FL DEPT OF STATE
IU .	-DIVISION-OF-CORPORATIONS
	P.O. BOX 6327
	TALLAHASSEE FL 32314
•	

AMERICAN ACCOUNTING OF SARASOTA 4509 BEE RIDGE ROAD STE. B SARASOTA, FL 34233

SUBJEC	T
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A/R_LEARNING_KASTLE_LAUREL_DAY_CARE_AND_PRESCHOOL, INC.

JULY 14, 1999 MESSAGE ENCLOSED PLEASE FIND A COMPLETED APPLICATION AND CHECK IN THE AMOUNT OF \$150.00 FOR THE RENEWAL OF THE ABOVE MENTIONED CORPORATION. THE PRINCIPALS OF THE CORPORATION NEVER RECEIVED THE RENEWALS SENT PREVIOUSLY DUE AN ERROR IN THEIR ADDRESS AS FILED WITH THE ORIGINAL DOCUMENTS BY THEIR ATTORNEY. UPON COMPLETING THEIR BOOKKEEPING FOR THE SECOND QUARTER OF 1999, WE FOUND THAT THEY HAD NOT WRITTEN ANY CHECKS FOR THE RENEWAL. IS WAS UPON FURTHER INVESTIGATION THAT WE FOUND THE CLERICAL ERROR. .

WE ARE ASKING THAT THE PENALTY BE ABATED IN THIS CIRCUMSTANCE AS THE CORPORATION, BEING NEW, HAD NO KNOWLEDGE OF THE RENEWAL PROCESS AND LOOKED TO THEIR ATTORNEY FOR GUIDANCE. IN THIS CASE IT WAS NOT GIVEN. ANY LENIENCY WOULD BE APPRECIATED.

SIGNED.

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REPLY		
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TOPS FORM 3801 UPHO IN USA CENTED, DETAIN CANADY CODY		

RECIPIENT: REPLY ON PINK COPY - RETAIN WHITE COPY