

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State

07-10-2006 90027 038 ***558.75

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1. Entity Name
BRIGHT BEGINNINGS OF SARASOTA, INC.



Principal Place of Business
**3560 BEE RIDGE RD
SARASOTA, FL 34239**

Mailing Address
**5306 BROOKMEADE DRIVE
SARASOTA, FL 34232**

50022013

As of July 21, 2006

2. Principal Place of Business
**4111 Webber Street
Sarasota, FL**

3. Mailing Address
**4111 Webber Street
Sarasota, FL**



07052006 Chg-P CR2E034 (11/05)

City & State
34232 USA

City & State
34232 USA

4. FEI Number
65-0869903

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SLOAN, ELIZABETH
5306 BROOKMEADE DRIVE
SARASOTA, FL 34282**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 *Elizabeth Sloan*

7/5/06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DS** ☐ Delete
NAME **STAHLSCHEIDT, BARBARA J**
STREET ADDRESS **2709 ESPANOLA AVE**
CITY-ST-ZIP **SARASOTA, FL 34239**

TITLE **D** ☐ Delete
NAME **ELIZABETH, SLOAN**
STREET ADDRESS **5306 BROOKMEADE DR**
CITY-ST-ZIP **SARASOTA, FL 34232**

TITLE **D** ☐ Delete
NAME **SALLY, THORNHILL**
STREET ADDRESS **3010 E FOREST LAKE DR**
CITY-ST-ZIP **SARASOTA, FL 34232**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **S** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P/D/M** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V/T** ☐ Change ☒ Addition
NAME **Jennifer Sloan**
STREET ADDRESS **5306 Brookmeade Drive**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Elizabeth Sloan* (**Elizabeth Sloan**)

7/5/06

(941) 921-6722

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #