


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 21, 2004 08:00 AM
Secretary of State**

DOCUMENT # S04264 1. Entity Name KIDS CLUB PRESCHOOL, INC.	
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Principal Place of Business 236 ROSS ROAD TALLAHASSEE, FL 32305	Mailing Address 236 ROSS ROAD TALLAHASSEE, FL 32305
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DO NOT WRITE IN THIS SPACE



02192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3030427	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANGER, ALBERTA
236 ROSS ROAD
TALLAHASSEE, FL 32310

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000060436 02/23/04 00000 019 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRANGER, EUGENE 236 ROSS RD TALLAHASSEE, FL 32305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRANGER, ALBERTA 236 ROSS RD TALLAHASSEE, FL 32305
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12. 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 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: Alberta Granger 2/20/04 (850) 877-9600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #