

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2002 8:00 am
Secretary of State

0014289 AV

DOCUMENT # **S10864**

1. Entity Name
LITTLE FOLKS CHILD CARE AND EDUCATION SERVICE, I NC.

08-11-2002 90150 001 ***150.00
 08-11-2002 90150 002 *****8.75

Principal Place of Business
**6837 WEST COLONIAL DR
 ORLANDO FL 32818
 US**

Mailing Address
**6837 WEST COLONIAL DR
 ORLANDO FL 32818**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
6837, 6841 W. (Colonia) Dr.
 Suite, Apt. #, etc.
Orlando, Fl 32818.
 City & State
Orlando, Fl 32818.
 Zip Country
32818 - Orange

4. FEI Number **59-3075708**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**FOWKS, CATHERINE W
 7648 APPLE TREE CIRCLE
 ORLANDO FL 32819**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FOWKS, CATHERINE W 7648 APPLE TREE CR ORLANDO FL 32819 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WILLIS, VERA L. 7648 APPLE TREE CR ORLANDO FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINSTON, JAMIL C 7648 APPLE TREE CR ORLANDO FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ROEBUCK, WILLIAM JR 7648 APPLE TREE CR ORLANDO FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS- FOWKS, CATHERINE L 7648 APPLE TREE CIRCLE ORLANDO FL 32819 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fowks Catherine W. 7648 Apple Tree Circle Orlando, Fl. 32819. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fowks Catherine L. 7648 Apple Tree Circle Orlando, Fl. 32819 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **D. C. FOWKS** **7/31/02** **407-578-3867**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachments
LITTLE FOLKS' CHILDCARE and EDUCATION SERVICES, INC.

Hawassee Woods Shopping Center
6837 W. Colonial Drive
Orlando, Fl. 32818



98273

Dr. Catherine W. Foulks, President
Mrs. Vera L. Wills, Vice President

510864

To: Florida Department of State

From: Little Folks Childcare & Education Services, Inc.

Date: July 31, 2002

Re: Annual Report/Uniform Business Report

To Whom It May Concern:

In regards to your letter stating that this report had not been filed before the due date. The reason that the report had not been filed was because we had not received the report in the mail. I made two telephone calls to notify the Division of Corporations report section that we had not received the company's Annual Report/Uniform Business Report application to complete. It was not until the third call that I spoke to someone and she took care of the matter and promised to mail a report application.

I did not receive the Company's AR/UBR until after the deadline, therefore we would like for the late charge to be excused.

We always take pride in sending our Company Report on time.

If you have any questions, please feel free to contact me at 407-578-3867.

Thank you,

Dr. Catherine W. Foulks, President