

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 AM 11:38

DOCUMENT # S33553 (6)

1. Corporation Name

TOYS 'N TOTS ACADEMY, INC.

Principal Place of Business

**1735 1/2 SOUTH FERNCREEK
ORLANDO FL 32806**

Mailing Address

**1735 1/2 SOUTH FERNCREEK
ORLANDO FL 32806**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/21/1991

3a. Date of Last Report
03/17/1994

4. FEI Number
59-3058865

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under § 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. # etc.

26. Suite, Apt. # etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RUTBERG, GERALD S.
5055 SOUTH HIGHWAY 17-92
CASSELBERRY FL 32718**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0402 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0405, Florida Statutes.

SIGNATURE

Signature of Registered Agent (If Registered Agent is not a corporation)

Signature of Registered Agent (If Registered Agent is a corporation)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	VTD CHAMBERS, EVADEANE 205 CUMBERLAND CIRCLE W. LONGWOOD FL
NAME	SD HOLT, SHIRLEY 3002 PIGEON HAWK COURT ORLANDO FL
NAME	PD HOLT, LOIS 3002 PIGEON HAWK COURT ORLANDO FL
NAME	
NAME	
NAME	
NAME	
NAME	
NAME	
NAME	

1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY & ZIP		☐ Change ☐ Addition
4. NAME		
5. STREET ADDRESS		
6. CITY & ZIP		☐ Change ☐ Addition
7. NAME		
8. STREET ADDRESS		
9. CITY & ZIP		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY & ZIP		☐ Change ☐ Addition
13. NAME		
14. STREET ADDRESS		
15. CITY & ZIP		☐ Change ☐ Addition
16. NAME		
17. STREET ADDRESS		
18. CITY & ZIP		☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated on Form 1001 or 1002, Florida Statutes. I further certify that the information is based on the corporation's request or request made by the corporation and that my signature shall have the same legal effect as if made by the corporation. I am familiar with and accept the obligations of the corporation in the event of a dispute arising from this request as required by Chapter 607, Florida Statutes, and that my name appears on the list of the corporation's officers and directors.

SIGNATURE: Evadeane & Chambers Evadeane D. Chambers 1/9/95 (407) 898 8687
V/T/O