

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # S71486			
1. Entity Name GOOD HOMES PRESCHOOL OF ORLANDO, INC.			
Principal Place of Business 8959 W COLONIAL DRIVE OCOE, FL 34761 US	Mailing Address 8959 W COLONIAL DRIVE OCOE, FL 34761 US		
DO NOT WRITE IN THIS SPACE			
		02242006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-3075323	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PAIEWONSKY, IVELISSE 8959 W COLONIAL DRIVE OCOE, FL 34761		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
		U00000481429 04/11/06-80031-025 150.00	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST PAIEWONSKY, IVELISSE 8959 W COLONIAL DR OCOE, FL		
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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: 		3.24.06	- 407-299-4861
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>