

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

APPROVED
AND
FILED

95 JUN -8 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S89215**

1. Corporation Name

**WALDEN LAKE EARLY LEARNING
CENTER INC.**

Principal Place of Business

Mailing Address

**2730 TURKEY CREEK RD.
PLANT CITY, FL. 33567** ← SAME

900001510149
-06/09/95--01086--012
******225.00 ****225.00**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

1992

3a. Date of Last Report

1994

4. FEI Number

59-3096605

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 S. 199 (32)
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SUSAN RIND
4004 ASBURY CT.
PLANT CITY, FL. 33567**

81 Name

ADDRESS CHANGE

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

4004 ASBURY CT

83

84 City

PLANT CITY

FL

85 Zip Code

33567

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Susan Rind

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

(NOTE: Registered Agent signature required when registering)

DATE

5-21-95

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PRESIDENT - TREASURE

11 TITLE

☐ Change ☐ Addition

NAME

SUSAN RIND

12 NAME

STREET ADDRESS

4004 ASBURY CT

13 STREET ADDRESS

CITY, ST, ZIP

PLANT CITY FL. 33567

14 CITY, ST, ZIP

TITLE

VICE PRESIDENT - SECRETARY

21 TITLE

☐ Change ☐ Addition

NAME

MICHAEL RIND

22 NAME

STREET ADDRESS

4004 ASBURY CT

23 STREET ADDRESS

CITY, ST, ZIP

PLANT CITY FL. 33567

24 CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

31 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Susan Rind

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUSAN RIND

May 21, 1995

DATE

813-750-7008

OFFICE PHONE

SW