

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State
 01-31-2002 90089 025 ***150.00

0000719 AV

DOCUMENT # V07353

1. Entity Name

SHARING TREE PRE-SCHOOL, INC.

Principal Place of Business

**6045 GREENLAND RD
 JACKSONVILLE FL 32258**

Mailing Address

**6045 GREENLAND RD
 JACKSONVILLE FL 32258**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3105920

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**BRATTON, BRENDA J.
 9925 ORCHARD HILLS RD
 JACKSONVILLE FL 32256**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

NA



**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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 **CST** ☐ Delete
 NAME **BRATTON, DENNIS A.**
 STREET ADDRESS **6045 GREENLAND RD**
 CITY-ST-ZIP **JACKSONVILLE FL 32258**

TITLE **DMP** ☐ Delete
 NAME **BRATTON, BRENDA J.**
 STREET ADDRESS **6045 GREENLAND RD**
 CITY-ST-ZIP **JACKSONVILLE FL 32258**

TITLE **DM** ☐ Delete
 NAME **BRATTON, JACOB L.**
 STREET ADDRESS **3529 EQUESTRIAN CT**
 CITY-ST-ZIP **JACKSONVILLE FL 32223**

TITLE **DM** ☐ Delete
 NAME **BRATTON, JASON D.**
 STREET ADDRESS **3964 CATTAIL POND DRIVE**
 CITY-ST-ZIP **JACKSONVILLE FL 32224**

TITLE **DM** ☐ Delete
 NAME **BRATTON, ANGELA**
 STREET ADDRESS **3964 CATTAIL POND DRIVE**
 CITY-ST-ZIP **JACKSONVILLE FL 32224**

TITLE **DM** ☐ Delete
 NAME **BRATTON, JENEAN**
 STREET ADDRESS **3529 EQUESTRIAN COURT**
 CITY-ST-ZIP **JACKSONVILLE FL 32223**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DM** ☐ Change ☒ Addition
 NAME **Jennifer Farber**
 STREET ADDRESS **7607 Fawn Lake Dr. North**
 CITY-ST-ZIP **Jacksonville, FL 32256**

TITLE **DM** ☐ Change ☒ Addition
 NAME **David Farber**
 STREET ADDRESS **7607 Fawn Lake Dr. North**
 CITY-ST-ZIP **Jacksonville, FL 32256**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Brenda S. Bratton
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-17-02 904-260-2015

CR2E034 (9/01)