

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 8:00 am
Secretary of State

01-30-2008 90034 024 ***150.00

DOCUMENT # V07353 1. Entity Name SHARING TREE PRE-SCHOOL, INC.	
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Principal Place of Business
**6045 GREENLAND RD
JACKSONVILLE, FL 32258**

Mailing Address
**6045 GREENLAND RD
JACKSONVILLE, FL 32258**

66002156



01142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3105920	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**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 [Signature] (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CST BRATTON, DENNIS A. 6045 GREENLAND RD JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DMP BRATTON, BRENDA J. 6045 GREENLAND RD JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM BRATTON, JACOB L. 3529 EQUESTRIAN CT JACKSONVILLE, FL 32223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM BRATTON, JASON D. 3964 CATTAIL POND DRIVE JACKSONVILLE, FL 32224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM FARBER, JENNIFER E 12416 BRIARMEAD LANE JACKSONVILLE, FL 32258
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/08
Date

904-210-2015
Daytime Phone