

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V07353

FILED
Mar 24, 2009
Secretary of State

Entity Name: SHARING TREE PRE-SCHOOL, INC.

Current Principal Place of Business:

6045 GREENLAND RD
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

6045 GREENLAND RD
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 59-3105920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

BRATTON, BRENDA J.
12416 BRIARMEAD LANE
JACKSONVILLE, FL 32258 US

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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CST () Delete
Name: BRATTON, DENNIS A.,
Address: 6045 GRERNLAND RD
City-St-Zip: JACKSONVILLE, FL 32258

Title: DMP () Delete
Name: BRATTON, BRENDA J.,
Address: 6045 GREENLAND RD
City-St-Zip: JACKSONVILLE, FL 32258

Title: DM () Delete
Name: BRATTON, JACOB L.,
Address: 3529 EQUESTRIAN CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: DM () Delete
Name: BRATTON, JASON D.,
Address: 3964 CATTAIL POND DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: DM () Delete
Name: FARBER, JENNIFER E
Address: 12416 BRIARMEAD LANE
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DM (X) Change () Addition
Name: BRATTON, JASON D.,
Address: 6045 GREENLAND ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER FARBER

DM

03/24/2009

Electronic Signature of Signing Officer or Director

Date