


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 08, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V22492</b>	
1. Entity Name A LITTLE PRE-SCHOOL HOUSE, INC.	

Principal Place of Business 4504 SUNDERLAND ROAD JACKSONVILLE, FL 32210	Mailing Address 4504 SUNDERLAND ROAD JACKSONVILLE, FL 32210
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01052008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3112749	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BUSH, SUSAN K. 4715 QUEEN LANE JACKSONVILLE, FL 32210
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**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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting) 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	P BUSH, SUSAN K. 4715 QUEEN LANE JACKSONVILLE, FL 32210
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BUSH, TIMOTHY W. 4715 QUEEN LANE JACKSONVILLE, FL 32210
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/08/08-80032-016 150.00

**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:**

*Susan K. Bush*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

904  
206-3196  
1/2/08