

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000004117

**FILED**  
**Feb 11, 2014**  
**Secretary of State**  
**CC5296870226**

**Entity Name:** TREEHOUSE PRESCHOOL ACADEMY, INC.

**Current Principal Place of Business:**

1115 E MEMORIAL BLVD  
LAKELAND, FL 33801

**Current Mailing Address:**

PO BOX 91996  
LAKELAND, FL 33804-1996

**FEI Number: 45-5169450**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ARNOLD, STEPHEN R  
1115 E MEMORIAL BLVD  
LAKELAND, FL 33801 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            ARNOLD, SHIRLEY A  
Address        PO BOX 91996  
City-State-Zip: LAKELAND FL 33804-1996

Title            VP, DIRECTOR  
Name            PARKS, HOPE  
Address        PO BOX 91996  
City-State-Zip: LAKELAND FL 33804-1996

Title            TREASURER, DIRECTOR  
Name            BEDIENT, KIMBERLEY A  
Address        PO BOX 91996  
City-State-Zip: LAKELAND FL 33804-1996

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KIMBERLEY A BEDIENT**

**TREASURER**

**02/11/2014**

Electronic Signature of Signing Officer/Director Detail

Date