

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J16158

**Entity Name:** MUNCHKINLAND CHILD CARE CENTER, INC.

**Current Principal Place of Business:**

3930 FAY BLVD.  
COCOA, FL 32927

**Current Mailing Address:**

3930 FAY BLVD.  
COCOA, FL 32927

**FEI Number:** 59-2700032

**Certificate of Status Desired:** No

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

BARTLETT, GARY K.  
3930 FAY BLVD.  
COCOA, FL 32927 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 PD  
Name BARTLETT, GARY K.  
Address 3930 FAY BLVD.  
City-State-Zip: COCOA FL 32927

Title VST  
Name BARTLETT, CAROL LYNN  
Address 3930 FAY BLVD.  
City-State-Zip: COCOA FL 32927

Title D  
Name VAN VUREN, TIFFANY L  
Address 6755 OPAL AVE  
City-State-Zip: COCOA FL 32927

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

**SIGNATURE:** GARY K BARTLETT

**PRESIDENT**

**01/16/2015**

Electronic Signature of Signing Officer/Director Detail

Date