

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J37102

FILED  
Mar 10, 2004  
Secretary of State

Entity Name: BRANDT'S CHILD CARE CENTER, INC.

## Current Principal Place of Business:

142 MASTERS DR.  
SAINT AUGUSTINE, FL 32084

## New Principal Place of Business:

## Current Mailing Address:

142 MASTERS DR.  
SAINT AUGUSTINE, FL 32084 US

## New Mailing Address:

3921 VAILL POINT TERRACE  
SAINT AUGUSTINE, FL 32086 US

FEI Number: 59-2722997

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUTTON, DONALD  
142 MASTERS DRIVE  
ST. AUGUSTINE, FL 32084

## Name and Address of New Registered Agent:

SUTTON, DONALD  
3921 VAILL POINT TERRACE  
ST. AUGUSTINE, FL 32086

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:

03/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SUTTON, DONALD,  
Address: 142 MASTERS DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: P ( ) Delete  
Name: SUTTON, CHERI L  
Address: 142 MASTERS DR.  
City-St-Zip: ST.AUGUSTINE, FL 32095

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SUTTON, DONALD,  
Address: 142 MASTERS DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: P (X) Change ( ) Addition  
Name: SUTTON, DONALD J  
Address: 3921 VAILL POINT TERRACE  
City-St-Zip: ST.AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONALD JOE SUTTON

P

03/10/2004

Electronic Signature of Signing Officer or Director

Date