

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000087724

**Entity Name:** PAISLEY OAKES CHILD CARE CENTER, INC.

**Current Principal Place of Business:**

24960 CR 42  
PAISLEY, FL 32767

**Current Mailing Address:**

5855 SANDY SPRINGS CIRCLE  
SUITE 300  
SANDY SPRINGS, GA 30328 US

**FEI Number:** 59-3235279

**Certificate of Status Desired:** No

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

CLEMENT, G. EDWARD ESQ.  
308 E. FIFTH AVENUE  
MOUNT DORA, FL 32757 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 DP  
Name WAGNER, CRAIG A  
Address 5855 SANDY SPRINGS CIRCLE, SUITE  
300  
City-State-Zip: SANDY SPRINGS GA 30328

Title S  
Name WAGNER, DEBORA M  
Address 5855 SANDY SPRINGS CIRCLE, SUITE  
300  
City-State-Zip: SANDY SPRINGS GA 30328

*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:** CRAIG A. WAGNER

DP

04/15/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date