2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# L02000004894

Entity Name: KID'S PLACE LEARNING CENTER, LLC

Current Principal Place of Business:

9490 PENSACOLA BOULEVARD
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

9490 PENSACOLA BOULEVARD
PENSACOLA, FL 32534

New Mailing Address:

3077 WHITLEY LANE
PACE, FL 32571

FEI Number: 59-3645542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUNN, ROBERT L
8110 BANBERRY ROAD
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

DUNN, ROBERT L
3077 WHITLEY LAND
PACE, FL 32571 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: ROBERT L. DUNN 02/15/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DUNN, ROBERT L
Address: 8110 BANBERRY RD.
City-St-Zip: PENSACOLA, FL 32514 US

Title: MGRM ( ) Delete
Name: DUNN, NANCY B
Address: 8110 BANBERRY RD.
City-St-Zip: PENSACOLA, FL 32514 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DUNN, ROBERT L
Address: 3077 WHITLEY LANE
City-St-Zip: PACE, FL 32571 US

Title: MGRM (X) Change ( ) Addition
Name: DUNN, NANCY B
Address: 3077 WHITLEY LANE
City-St-Zip: PACE, FL 32571 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NANCY B. DUNN MGRM 02/15/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date