

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**May 21, 2010**  
**Secretary of State**

DOCUMENT# N01000000953

Entity Name: CHOICES IN LEARNING, INC.

**Current Principal Place of Business:**

893 E. SR 434  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

893 E. SR 434  
LONGWOOD, FL 32750

**New Mailing Address:**

FEI Number: 59-3728385      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCKENZIE, GEORGE  
1229 ROXBORO RD  
LONGWOOD, FL 32750      US

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

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

**OFFICERS AND DIRECTORS:**

Title: DC  
Name: MCKENZIE, GEORGE  
Address: 1229 ROXBORO RD  
City-St-Zip: LONGWOOD, FL 32750

Title: VC  
Name: GAINER, BARRY  
Address: 1664 WINDY BLUFF POINT  
City-St-Zip: LONGWOOD, FL 32750

Title: D  
Name: MARSHALL, BOE  
Address: 1416 MADRID WAY  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T  
Name: APPLE, T J  
Address: 4945 ROCK ROSE LOOP  
City-St-Zip: SANFORD, FL 32771

Title: S  
Name: SCOTT, TERRANCE J  
Address: 456 WILD FOX DRIVE  
City-St-Zip: CASSELBERRY, FL 32707

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: GEORGE MCKENZIE

C

05/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date