

N 98000001622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

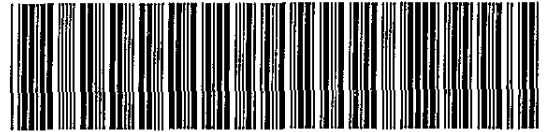
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300009382893

12/16/02--01025--018 **35.00

FILED
02 DEC 16 AM 9:53
CLERK OF STATE
TALLAHASSEE, FLORIDA

PS 12/31/02
12/10

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADVENTURES IN EARLY LEARNING ACADEMY, INC

(Name of corporation)

DOCUMENT NUMBER: N98000001622

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

SUEZENETTE MCDONALD

(Name of person)

ADVENTURES IN EARLY LEARNING ACADEMY, INC

(Name of firm/company)

688 LOCK ROAD

(Address)

DEERFIELD BEACH, FL 33442

(City/state and zip code)

For further information concerning this matter, please call:

SUEZENETTE MCDONALD

(Name of person)

at (954) 427-4831

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ADVENTURES IN EARLY LEARNING ACADEMY, INC
2. The principal office address: 688 LOCK ROAD, DEERFIELD BEACH, FL 33442
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 03/16/1998 Document number: N98000001622

FILED
02 DEC 18 AM 9:54
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

RALPH W. ADDERLY
321 W. ATLANTIC BLVD.
POMPANO BEACH, FL 33061-2006

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SUEZENETTE MCDONALD
688 LOCK ROAD
(P.O. Box or personal mailbox NOT acceptable)
DEERFIELD BEACH, FL 33442

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Suzenette McDonald
(Signature of an officer, chairman or vice chairman of the board)

SUEZENETTE MCDONALD, CHAIRPERSON
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Suzenette McDonald
(Signature of Registered Agent)

12/12/2002
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314