

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097113

FILED  
Jan 26, 2011  
Secretary of State

**Entity Name:** FOX MEADOWS LEARNING CENTER INC.

**Current Principal Place of Business:**

3227 OLD JENNINGS ROAD  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

**Current Mailing Address:**

3227 OLD JENNINGS ROAD  
MIDDLEBURG, FL 32068

**New Mailing Address:**

FEI Number: 59-3616139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DINGLE, DENNIS R III  
3227 OLD JENNINGS ROAD  
MIDDLEBURG, FL 32068 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: PD  
Name: DINGLE, DENNIS R III  
Address: 4768 SADDLEHORN TRAIL  
City-St-Zip: MIDDLEBURG, FL 32068

Title: VSD  
Name: DINGLE, GLENDA G  
Address: 4768 SADDLEHORN TRAIL  
City-St-Zip: MIDDLEBURG, FL 32068

Title: T  
Name: DINGLE, RICKIE  
Address: 4768 SADDLEHORN TR  
City-St-Zip: MIDDLEBURG, FL 32068

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: DENNIS R DINGLE III

PD

01/26/2011

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

\_\_\_\_\_ Date