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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 763685

1. Corporation Name

THE CREATIVE LEARNING CENTER OF KENDALL, INC.

434947 - 90274 - 10

Principal Place of Business

12455 SW 104TH STREET
MIAMI FL 33186

Mailing Address

12455 SW 104TH STREET
MIAMI FL 33186

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		06/15/1982	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2123460	
City & State		City & State		5. Certificate of Status Desired	
23		28		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Country		24	
25		29		30	
Country		Country		8. Election Campaign Financing Trust Fund Contribution	
24		29		30	
Country		Country		<input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

BARKSDALE, L
12022 SW 105 LANE
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name	NADINE McCONNEY		
82 Street Address (P.O. Box Number is Not Acceptable)			
83	14906 SW 104 STREET #53		
84 City	MIAMI	85 Zip Code	33196

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE



3/7/99

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	RAY INSANALLY	1.2 NAME	NADINE McCONNEY
STREET ADDRESS	12461 SW 79 ST	1.3 STREET ADDRESS	14906 SW 104 ST #53
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FL 33196
TITLE	PD	2.1 TITLE	D
NAME	LUNDA BARKSDALE	2.2 NAME	Emilia T. Alvarez
STREET ADDRESS	12022 SW 105 LANE	2.3 STREET ADDRESS	11823 SW 34 ST
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI
TITLE	STD	3.1 TITLE	D
NAME	ROLAND, VERNON	3.2 NAME	STEVEN MOUNTAIN
STREET ADDRESS	12401 SW 97 ST	3.3 STREET ADDRESS	11620 SW 13 AVE
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI, FL 33186
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 917, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



2/28/99

Date

CR2E037 (1/98)