Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0000008439 Entity Name: EARLY LEARNING COALITION OF DUVAL, INC.

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

8301 CYPRESS PLAZA DR. SUITE 201 JACKSONVILLE, FL 32256

Current Mailing Address:

8301 CYPRESS PLAZA DR. SUITE 201 JACKSONVILLE, FL 32256

FEI Number: 59-3688924

Name and Address of Current Registered Agent:

MAIN, SUSAN 8301 CYPRESS PLAZA DR. SUITE 201 JACKSONVILLE, FL 32256 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:

Electronic Signature of Registered Agent

Officer/Director Detail :			
Title	DC	Title	DV
Name	CHAPMAN, JENNIFER	Name	GENTRY, W.C.
Address	4601 TOUCHTON RD	Address	136 EAST BAY ST
City-State-Zip:	JACKSONVILLE FL 32245	City-State-Zip:	JACKSONVILLE FL 32202
Title	DT	Title	ED
Name	ROWE, MARCUS	Name	MAIN, SUSAN
Address	50 N. LAURA ST.	Address	8301 CYPRESS PLAZA DR.
	SUITE 3700	City-State-Zip:	JACKSONVILLE FL 32256
City-State-Zip:	JACKSONVILLE FL 32202		
Title	DS		
Name	FERGUSON, BRUCE		
Address	1845 TOWN CENTER BLVD		

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: SUSAN MAIN

SUITE 250 City-State-Zip: ORANGE PARK FL 32003

EXECUTIVE DIRECTOR 05/01/2014

FILED May 01, 2014 Secretary of State CC7208505163

Date

Certificate of Status Desired: No

Date