

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000035252

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC7070209269**

**Entity Name:** TLC EDUCATION CENTER, INC.

**Current Principal Place of Business:**

1255 S. FLORIDA AVE., SUITE A  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

1255 S. FLORIDA AVE., SUITE A  
ROCKLEDGE, FL 32955

**FEI Number:** 59-3714914

**Certificate of Status Desired:** No

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

MAHONEY, SARAH A  
1255 S. FLORIDA AVE., SUITE A  
ROCKLEDGE, FL 32955 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

Date

**Officer/Director Detail :**

Title            D  
Name            MAHONEY, SARAH A  
Address        1255 S. FLORIDA AVE., SUITE A  
City-State-Zip: ROCKLEDGE FL 32955

Title            D  
Name            MAHONEY, JAMES P  
Address        1255 S. FLORIDA AVE., SUITE A  
City-State-Zip: ROCKLEDGE FL 32955

*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:** SARAH A. MAHONEY

**DIRECTOR**

**04/26/2013**

Electronic Signature of Signing Officer/Director Detail

Date