## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 419721** 

Entity Name: MILTON LAVERNIA, INC.

FILED Apr 30, 2008 Secretary of State

US

Current Principal Place of Business: New Principal Place of Business:

5982 SW 18TH STREET
BOCA RATON, FL E3343 US
5982 SW 18TH STREET
BOCA RATON, FL 33433

Current Mailing Address: New Mailing Address:

C/O DINO MIGHT KIDS PRESCHOOL 5982 SW 18TH STREET

5982 SW 18TH ST F

BOCA RATON, FL 33433162 US BOCA RATON, FL 33433 US

FEI Number: 59-1449225 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LAVERNIA, MARLENE
1260 SW 15 ST
LAVERNIA, MARLENE
5982 SW 18 STREET

BOCA RATON, FL 33486 US F BOCA RATON, FL 33433 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: 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

## **OFFICERS AND DIRECTORS:**

Title:

Title: PT/D (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 LAVERNIA, MARLENE
 Name:
 LAVERNIA, MARLENE

 Address:
 1260 SW 15 ST
 Address:
 5982 SW 18 ST

 Address:
 1260 SW 15 ST
 Address:
 5982 SW 18 ST

 City-St-Zip:
 BOCA RATON, FL 33486
 City-St-Zip:
 BOCA RATON, FL 33433 US

Title: V ( ) Delete Title: S/D (X) Change ( ) Addition

 Name:
 CAMPBELL, RYAN C
 Name:
 CAMPBELL, RYAN C

 Address:
 1260 SW 15 ST
 Address:
 5982 SW 18 ST

City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: BOCA RATON, FL 33433 US

Title: S ( ) Delete Title: V/D (X) Change ( ) Addition Name: LAVERNIA, MILTON Name: CAMPBELL, MONICA K

 Address:
 1401 SW 8 ST
 Address:
 5982 SW 18 ST

 City-St-Zip:
 BOCA RATON, FL 33486
 City-St-Zip:
 BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARLENE LAVERNIA PRES 04/30/2008