SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT OUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FILED FLORIDA DEPARTMENT OF STATE PROFIT Sandra B. Mortham Secretary of State 96 DEC -6 PH 2: 46 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE FLORIDA DOCUMENT # 42388 School Center Inc. 70002022887--3 -12/06/96--01105--007 \*\*\*\*\*61.25 \*\*\*\*\*\*61.25 Mailing Address Principal Place of Business 126 Malan Date Incorporated or Qualified 3a. Date of Last Report 32308 Applied For Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required \$5,00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s. 199.032, Country\_ Yes No Florida Statutes 29 10. Name and Address of New Registered Agent Address of Current Registered Agent 81 Name Brandee Whitfield Street Address (P.O. Box Number is Not Acceptable) me han Pre - School 82 1726 Mahan Drive 83 Tollahussee, FL 32308 85 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, and accept the abligations of Section 607.0505, Florida Statute

Signature. Speed or printed name or registered agents.

NOTE Registered Apent servalure regulated when reinstalling. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS Change 12. esident 1.1 TITLE TITLE : markerald 1.2 NAME 35 Marst O Remedie ch Hollow NAME 1.3 STREET ADDRESS STREET ADDRESS 14 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP Change Addition CITY-ST-ZIP DELETE 31 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP Addition Change CITY-ST-ZIP DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP Change Addition CITY - ST - ZIP DELETE 5 1 TITLE TITI F 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP Addition Change CITY - ST - ZIP DELETE 61 TITLE TETLE 6.2 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(f). Elements that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the section of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Find that my name appears in Block 12 or Block 13 if changed, or on An attachment with an address. rida Statutes. I e legal effect as if atutes; and SIGNATURE:

JOR