## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 429562** 

Entity Name: LEARNING LABORATORIES, INC.

FILED Apr 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

2316 BRUNER LANE S E 12120 METRO PARKWAY FORT MYERS, FL 33912

SUITE D FORT MYERS, FL 33966

**Current Mailing Address: New Mailing Address:** 

2316 BRUNER LANE S E 12120 METRO PARKWAY FORT MYERS, FL 33912 SUITE D

FORT MYERS, FL 33966

FEI Number: 36-2614293 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:

JOHNSON, BROCK FOCEO AGNES, KIELY M PRES 2498 HARBOUR LANE 213 GRÉENWOOD AVE

LEHIGH ACRES, FL 33972 US SANIBEL, FL 33957

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: AGNES KIELY 04/16/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OCEO ( ) Delete Title: **PRFS** (X) Change ( ) Addition

JOHNSON, BROCK FOCEO AGNES, KIELY M PRES Name: Name: 2498 HARBOUR LANE 213 GREENWOOD AVE Address: Address: City-St-Zip: SANIBEL, FL 33957 City-St-Zip: LEHIGH, FL 33972

Title: (X) Delete Title: () Change () Addition

KENWORTHY, JAY E Name: Name: 1624 N. FOUNTAINHEAD ROAD Address: Address: FORT MYERS, FL 33919 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

JOHNSON, NANCY B.(AS, ST) Name: Name: 2498 HARBOUR LANE Address: Address: City-St-Zip: SANIBEL, FL City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

KIELY, AGNES M Name: Name: Address: 213 GREENWOOD AVENUE Address: City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: AGNES KIELY **PRES** 04/16/2007