

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 16, 2010
Secretary of State

DOCUMENT# 709077

Entity Name: BOYNTON BEACH CHILD CARE CENTER, INC.**Current Principal Place of Business:**909 NORTH EAST 3RD STREET
BOYNTON BEACH, FL 33435**New Principal Place of Business:****Current Mailing Address:**909 NORTH EAST 3RD STREET
BOYNTON BEACH, FL 33435**New Mailing Address:****FEI Number:** 59-1158422**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ASD RAHMING, LENA
235 NW 10TH AVE
BOYNTON BEACH, FL 33435 US**Name and Address of New Registered Agent:**RAHMING, LENA
235 NW 10TH AVE
BOYNTON BEACH, FL 33435 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: LENA RAHMING

11/16/2010

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: PD
Name: WHITE, DAN
Address: 524 NW 2ND ST
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: VPD
Name: WILLIAMS, EDWARD
Address: 235 NW 10TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: D
Name: FOARD, QUEENIE
Address: 909 NE 3RD ST
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: D
Name: KING, WADE
Address: 646 H 206 SNUG HARBOR DR
City-St-Zip: BOYNTON BEACH, FL 33435

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: DAN WHITE

PD

11/16/2010

Electronic Signature of Signing Officer or Director_____
Date