2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711090

FILED Aug 27, 2007 Secretary of State

Entity Name: COMMUNITY PRIDE CHILD CARE CENTER OF CLEARWATER, INC.

Current Principal Place of Business: New Principal Place of Business: 1235 HOLT AVE. CLEARWATER, FL 33755 US **Current Mailing Address: New Mailing Address:** 1235 HOLT AVE. CLEARWATER, FL 33755 US FEI Number: 59-0908144 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKELTON, MARTHA 2946 MAC ALPIN DR W PALM HARBOR, FL 34684 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PEACOCK, JENNY HUDOCK, AMY E Name: Name: 401 1ST AVENUE N.E. Address: 1488 CAIRN COURT Address: City-St-Zip: LARGO, FL 33770 City-St-Zip: PALM HARBOR, FL 34683 Title: Title: () Delete () Change () Addition JAN, TRACEY Name: Name: Address: 1006 WYNDHOM WAY Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: Title: () Delete Title: (X) Change () Addition CAMPBELL, GLORIA DELAY, BECKY Name: Name: 1077 WEATHERSFIELD DR Address: Address: 2808 HONEY BEAR COURT City-St-Zip: DUNEDIN, FL City-St-Zip: PALM HARBOR, FL 34684 Title: () Delete Title: () Change () Addition Name: YOUNG, ROBERT, Name: 1091 WEATHERFIELD DR. Address: Address: City-St-Zip: DUNEDIN, FL City-St-Zip: Title: () Delete Title: () Change () Addition GARVEY, RITA Name: Name: 1550 RIDGEWOOD ST Address: Address: City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: Title: () Delete Title: (X) Change () Addition O'DONNELL, CYNDI FBIF FFFIF Name: Name: Address: 3101 BISHOP DR Address: 2253 HANNAH WAY S. SAFETY HARBOR, FL 34695 DUNEDIN, FL 34698 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA M. SKELTON RA 08/27/2007