

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723653

FILED
Mar 29, 2010
Secretary of State

Entity Name: EARLY EDUCATION AND CARE, INC.

Current Principal Place of Business:

450 JENKS AVE.
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

450 JENKS AVE.
PANAMA CITY, FL 32401 US

New Mailing Address:

FEI Number: 59-1376048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, MONA
450 JENKS AVENUE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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:

Title: P
Name: PETERS, ALVIN
Address: 25 E. 8TH STREET
City-St-Zip: PANAMA CITY, FL 32401 US

Title: VP
Name: GIBBS, SERINA
Address: 1407 CONNECTICUT AVENUE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: T
Name: MAYO, CLINT
Address: 2916 FAIRMONT DRIVE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: S
Name: HALL, JANICE
Address: 807 BUENA VISTA BLVD.
City-St-Zip: PANAMA CITY, FL 32401 US

Title: D
Name: THREATT, RETHA
Address: 3040 KINGS ROAD
City-St-Zip: PANAMA CITY, FL 32405 US

Title: D
Name: MAYO, RHONDA
Address: 2916 FAIRMONT DRIVE
City-St-Zip: PANAMA CITY, FL 32405 US

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: ALVIN PETERS

P

03/29/2010

Electronic Signature of Signing Officer or Director

Date