2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729245

FILED Aug 21, 2006 Secretary of State

Entity Name: ALL SAINTS EARLY LEARNING AND COMMUNITY CARE CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

4171 HENDRICKS AVENUE JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

4171 HENDRICKS AVENUE JACKSONVILLE, FL 32207

FEI Number: 59-1500774 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:

THOMPSON, ANN WHITE, PHILIP T

3530 NEWCASTLE CREEK DRIVE 4171 HÉNDRICKS AVENUE JACKSONVILLE, FL 32277 JACKSONVILLE, FL 32207 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: PHILIP T. WHITE 08/21/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32257

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32207

(X) Change () Addition () Delete THOMPSON, ANN DEPPE, THOMAS W Name: Name:

Address: 3530 NEWCASTLE CREEK DRIVE Address: 4171 HENDRICKS AVENUE City-St-Zip: JACKSONVILLE, FL 32277 US City-St-Zip: JACKSONVILLE, FL 32207 US

Title: () Delete Title: (X) Change () Addition DATRES, CATHERINE Name: Name: DATRES, MIKE

Address: 1824 CORNELL ROAD Address: 2859 CASA DEL RIO TERRACE City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32257 US

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

MARNIE, JONES DEPPE, THOMAS W Name: Name: 7866 TURNSTONE CIRCLE W. 4171 HENDRICKS AVENUE Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 US City-St-Zip: JACKSONVILLE, FL 32207 US

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

Name: PEARCE, GILLIAN Name: WHITE, PHILIP T 8623 SANCHEZ ROAD 4171 HENDRICKS A VENUE Address: Address:

City-St-Zip: JACKSONVILLE, FL 32217 US City-St-Zip: JACKSONVILLE, FL 32207 US

Title: () Delete Title: (X) Change () Addition VIRGINIA, MAHAR WETMORE, MALISA Name: Name: 1551 KINGSWOOD ROAD 4348 BALLINGER DR. Address: Address:

Title: Title:

() Delete (X) Change () Addition MERCIER, LEE ADAMS, JUDI Name: Name: Address: 1956 LARGO PLACE Address: 3435 HENDRICKS AVE JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32207 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: PHILIP T. WHITE D 08/21/2006