2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004302

FILED Apr 12, 2004 Secretary of State

Entity Name: THE LEARNING FOUNDATION OF TEXAS, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DREWS AVE	NUE			
STE 160 FORT LAU	IDERDALE, FL	_ 33306			
Current Mailing Address:			New Mailing Addres	s:	
6600 N ANDREWS AVENUE STE 160 FORT LAUDERDALE, FL 33306			5		
		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
FORT LAU	DREWS AVE IDERDALE, FI	_ 33309	ourpose of changing its registere	ed office or registered agent, or both,	
in the State			purpose of changing to regions	a omes of registered agent, or bean,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PC () HILLIARD, JAM 7 OCEAN PLAC BOCA RATON,	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HILLIARD, JAM 6600 N ANDRE	Delete ES W WS AVE STE 160 DALE, FL 33309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HINDES, RICHA 6600 N ANDRE	Delete NRD C WS AVENUE STE 160 DALE, FL 33309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WALLACK, SHA 8176 DEAN RO INDIANAPOLIS	AD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () JOHNSTON, DI 5995 NORTHAN DALLAS, TX 75	'EN ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD C. HINDES T 04/12/2004