2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000599

Entity Name: CHILDREN'S CHOICE LEARNING CENTERS, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
3610 SHIRE BLVD SUITE 208 RICHARDSON, TX 75082					
Current Mailing Address:			New Mailing Address:		
1610 SHIRE BLVD SUITE 208 RICHARDSON, TX 75082					
FEI Number: (62-1734015	FEI Number Applied For () FEI Num	nber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NATIONAL CORPORATE RESEARCH, LTD., INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITION			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CHRISTOPHER	FULLARTON STREET	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition CHRISTOPHER J.K. GOO, DWIN 3610 SHIRE BLVD SUITE 208 RICHARDSON, TX 75082	
Title: Name: Address: City-St-Zip:	DRAKE, JOHN D	FULLARTON STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DRAKE, JOHN D 3610 SHIRE BLVD SUITE 208 RICHARDSON, TX 75082	
Title: Name: Address: City-St-Zip:	DPCE () [MCCLINTOCK, N 3610 SHIRE BLV RICHARDSON, T	D SUITE 208	Title: Name: Address: City-St-Zip:	COO (X) Change () Addition MCCLINTOCK, DONNA 3610 SHIRE BLVD SUITE 208 RICHARDSON, TX 75082	
Title: Name: Address: City-St-Zip:	EVP () [MCCLINTOCK, D 3610 SHIRE BLV RICHARDSON, T	D SUITE 208	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()[COMPTON, RON 8909 LADUE RO ST. LOUIS, MO	AD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TCFO () ELAWLER, DANIE 3610 SHIRE BLV RICHARDSON, T	D SUITE 208	Title: Name: Address: City-St-Zip:	()Change()Addition	

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

SIGNATURE: RONALD N. COMPTON S 03/23/2009