

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004560

FILED
Apr 08, 2008
Secretary of State

Entity Name: A KID'S PLACE LEARNING ACADEMY AND CHILDCARE, INC.

Current Principal Place of Business:

2117 PINEHURST WAY
CORAL SPRINGS, FL 33071

New Principal Place of Business:

427 GAZETTA WAY
WEST PALM BEACH, FL 33413

Current Mailing Address:

2117 PINEHURST WAY
CORAL SPRINGS, FL 33071

New Mailing Address:

427 GAZETTA WAY
WEST PALM BEACH, FL 33413

FEI Number: 26-0849615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHITE, MILLICENT
2117 PINEHURST WAY
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

ACCURATE RETURNS
8045 W OAKLAND PARK BLVD
SUNRISE, FL 33351 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: CT

04/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: WHITE, MILLICENT
Address: 2117 PINEHURST WAY
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP () Delete
Name: WHITE, MILLICENT
Address: 2117 PINEHURST WAY
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: QUINTERO, HILLARY
Address: 427 GAZETTA WAY
City-St-Zip: WEST PALM BEACH, FL 33413

Title: VP (X) Change () Addition
Name: QUINTERO, HILLARY
Address: 427 GAZETTA WAY
City-St-Zip: WEST PALM BEACH, FL 33413

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: CT

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04/08/2008

Electronic Signature of Signing Officer or Director

Date