FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F78692

(3)

LOVE & LEARN PRESCHOOL, INC.

Principal Place of Business 843 S.W. MARYMAC STREET LIVE OAK FL 32060		Mailing Address 843 S.W. MARYMAC STREET LIVE OAK FL 32060-3918								
						3. Date Incorporated or Qualified	l	te of Last R	eport	
2. Principal F	race of Business	2a. Mailing Address			***************************************	05/04/1982 4. FEI Number	L_U0/1	01/1 996 An	plied For	
		26				59-2184609 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional				
22		27				>).		Fee Re	quired	1
City & State		City & State				6. Election Campaign Financing \$5.00 May Be				
710	Country	Zip	T	untry		Trust Fund Contribution		Added t		-
Zip 24	Country 25	29 29	30	untry		8. This corporation has liability for in Florida Statutes		tax under s. ⊒ No	199.032,	
24)	9. Name and Address of Cur		30	T -		10. Name and Address of New Reg				•
NID				81	Name			E		1
Durden, Jessie E. Rt. 1 Box 308				82	Stroot Addre	ress (P.O. Box Number is Not Acceptable)				-
	OAK FL 32060			02	Sileet Addie	ss (r.o. box number is not Acceptable				
				83						
				84	City			85 Zip (Code	
					•	oration submits this statement for the pu	FL			
agent La	am familiar with, and accept the ob-	oligations of, Section 607,0505, Fl	orida St	atutes red Age	nt e corporation. In signature requires		DATE			
12.	OFFICERS AND DIRECTORS		13			ADDITIONS/CHANGES TO OFFICE	ERS AND			8
TITLE	DP DELETE DURDEN, JESSIE RT. 1 BOX 308			1 1 TITLE				Change	Addition	CR2E034 (9/96)
NAME				NAME		•				쩘
STREET ADDRESS				3 STREET ADDRESS						띴
CITY - ST - ZIP TITLE	LIVE OAK, FL 00000		1.4 CIFY - ST - ZIP 2.1 TITLE					Change	Addition	뚱
NAMÉ	SVD Durden, Larry	Land Callette	221		(• •		دواست	1.00	
STREET ADDRESS	RT. 1 BOX 308		E		ADDRESS					
Crty+S1+ZiP	LIVE OAK, FL 00000			CITY-		•				
117LE	<u> </u>	DELETE		TITLE	<u> </u>	The state of the s	2.	Change	Addition	1
NAME			3.2	NAME		*				
STREET ADDRESS			3.3	STREET	ADORESS					1
CITY - ST - ZIP			3.4	CITY-	ST-ZIP					
T)*LE		☐ DELETE	4.1	TITLE				Change	Addition	1
NAME.			4. 2	NAME						
STREET ADDRESS			4,3	STREET	ADDRESS					
CITY-ST-ZIP		Florier		CITY-S	ST-ZIP			T 05	A a a a a a a	-
TITLE		☐ DEFELE		TITLE				Change	Addition	
NAME				NAME						
STREET ADORESS			5.3	STREET	ADDRESS					
CHTY-ST-ZIF					T 71.0					
TITLE		☐ DELETE		CITY-S TITLE	ST - ZIP			Change	Addition	┨

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CHTY-ST-ZIP