


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G52334 1. Entity Name EARLEY LEARNING SYSTEMS INC.	
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**FILED**  
**Sep 09, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business 1743 BANKS ROAD MARGATE, FL 33063 US	Mailing Address 1743 BANKS RD POMPAÑO BEACH, FL 33063 US
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05062008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2313618	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  EARLEY, JAMES J 5323 NW 80 TERR PARKLAND, FL 33067	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000955284 09/09/08-80004-019 550.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EARLEY, JAMES J 5323 NW 80 TERR PARKLAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EARLEY, CORINNE A 5323 NW 80 TERR PARKLAND, FL
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Corinne Earley* **Corinne Earley** *9/5/08* **954-979-3131**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #