

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G78463

FILED
Oct 22, 2004
Secretary of State

Entity Name: LAND OF LEARNING ACADEMY INC.

Current Principal Place of Business:

8809 W ROBSON ST.
TAMPA, FL 336152314

New Principal Place of Business:

Current Mailing Address:

8809 W ROBSON ST.
TAMPA, FL 336152314

New Mailing Address:

FEI Number: 59-2153574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, SHERRY
8809 W. ROBSON STREET
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, SHERRY
Address: 12334 TARPON SPRINGS ROAD
City-St-Zip: ODESSA, FL 33556

Title: VT () Delete
Name: BARRY, JOSEPH C
Address: 12334 TARPON SPRINGS ROAD
City-St-Zip: ODESSA, FL 335565654

Title: S () Delete
Name: BERTRAM, JUDY C
Address: 5414 DEARBROOKE CREEK CIR-#7
City-St-Zip: TAMPA, FL 336244193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BERTRAM, JUDY C
Address: 8913 DELTA LANE
City-St-Zip: TAMPA, FL 336351060

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

SIGNATURE: SHERRY BROWN

PRES

10/22/2004

Electronic Signature of Signing Officer or Director

Date