2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2004
Secretary of State

DOCUMENT# M03000001806

Entity Name: KINDERCARE REAL ESTATE, LLC

Current Principal Place of Business:

650 NE HOLLADAY, SUITE 1400
PORTLAND, OR 97232

New Principal Place of Business:

650 NE HOLLADAY STREET
SUITE 1400 - TAX DEPT.
PORTLAND, OR 97232

Current Mailing Address:

650 NE HOLLADAY, SUITE 1400
PORTLAND, OR 97232

New Mailing Address:

650 NE HOLLADAY STREET
SUITE 1400 - TAX DEPT.
PORTLAND, OR 97232

FEI Number: 63-1120501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: KINDERCARE LEARNING, CENTERS, INC.
Address: 650 NE HOLLADAY, SUITE 1400
City-St-Zip: PORTLAND, OR 97232

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: JOHNSON, DAVID J CEO
Address: 650 NE HOLLADAY, SUITE 1400
City-St-Zip: PORTLAND, OR 97232

Title: MGR ( ) Change (X) Addition
Name: WALTERS, BRUCE A VP
Address: 650 NE HOLLADAY, SUITE 1400
City-St-Zip: PORTLAND, OR 97232

Title: MGR ( ) Change (X) Addition
Name: JACKSON, DAN R CFO
Address: 650 NE HOLLADAY, SUITE 1400
City-St-Zip: PORTLAND, OR 97232

Title: MGR ( ) Change (X) Addition
Name: BENEDICT, DAVID A VPTX
Address: 650 NE HOLLADAY, SUITE 1400
City-St-Zip: PORTLAND, OR 97232

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID A BENEDICT VP 04/09/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date