

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M85094

FILED
Apr 22, 2009
Secretary of State

Entity Name: BURRELL'S KINDERGARTEN & NURSERY SCHOOL, INC.

Current Principal Place of Business:

4162 SPRING PARK CIRCLE
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

4162 SPRING PARK CIRCLE
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-2951963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURRELL, GEORGE T
7614 HILSDALE RD
JACKSONVILLE, FL 32216 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURRELL, GEORGE
Address: 7614 HILDALE RD.
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: BURRELL, BESSIE M.
Address: 4162 SPRING PARK CIRCLE
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BURRELL, BESSIE M.
Address: 12 STATE ROAD 13
City-St-Zip: ST JOHNS, FL 32219

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: GEORGE BURRELL

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date