2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2009
Secretary of State

DOCUMENT# N00000001119

Entity Name: THE EXCELLENT CHILD LEARNING CENTER AND GREATGOD ANOINTED WORD CENTER, INC.

Current Principal Place of Business:

909 29TH ST
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

909 29TH ST
W. PALM BEACH, FL 33402

New Mailing Address:

FEI Number: 65-0932912 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TURNER, DELORES E DR.
909 29TH ST
WEST PALM BEACH, FL 33407 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

OFFICERS AND DIRECTORS:

Title:	CEO	( ) Delete
Name:	TURNER, DELORES E	
Address:	909 29TH ST	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	SD	( ) Delete
Name:	JOE, MELINDA	
Address:	380 W. 28TH STREET	
City-St-Zip:	RIVIERA BEACH, FL 33404	
Title:	TD	( ) Delete
Name:	JOE, MELLO	
Address:	909 29TH STREET	
City-St-Zip:	W. PALM BEACH, FL 33407	
Title:	D	( ) Delete
Name:	WILEY, MELISSA	
Address:	2959 W. 31ST STREET	
City-St-Zip:	RIVIERA BEACH, FL 33404	
Title:	D	( ) Delete
Name:	JOE, MIRIAM	
Address:	410 W. 27TH STREET	
City-St-Zip:	W. PALM BEACH, FL 33404	
Title:	MBR	( ) Delete
Name:	GUNTER, JOYCE	
Address:	3475 GUNDRY AVE	
City-St-Zip:	LONG BEACH, CA 90807	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	JOE, MIRIAM	
Address:	838 CYPRESS DR	
City-St-Zip:	LAKE PARK, FL 33403	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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

SIGNATURE: DR DELORES TURNER CEO 06/05/2009

Electronic Signature of Signing Officer or Director — Date