

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003385

FILED
Mar 07, 2006
Secretary of State

Entity Name: EARLY LEARNING COALITION OF INDIAN RIVER, MARTIN AND OKEECHOBEE COUNTIES, INC.

Current Principal Place of Business:

2415 SOUTH 29TH ST.
FORT PIERCE, FL 34981

New Principal Place of Business:

Current Mailing Address:

2415 SOUTH 29TH ST.
FORT PIERCE, FL 34981

New Mailing Address:

FEI Number: 65-1035652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODEN, GERALD T
2345 14TH AVENUE, SUITE 3
VERO BEACH, FL 32960 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: D () Delete
Name: RODEN, GERALD T ESQ.
Address: 2345 14TH AVE., STE. 3
City-St-Zip: VERO BEACH, FL 32969

Title: D () Delete
Name: GRIGGS, NAN
Address: 1419 SW DYER POINT
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: MILLER, KENNETH E
Address: 2907 OCEAN DRIVE
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: GWENDA, THOMPSON
Address: 2020 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: PERRY, SANDY
Address: 2020 SE OCEAN BLVD
City-St-Zip: STUART, FL 34996

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: PEER, TOM
Address: 209 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34974

I hereby certify that the information supplied with this filing does not qualify for the 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: GERALD T. RODEN

MR.

03/07/2006

Electronic Signature of Signing Officer or Director

Date