2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2006
Secretary of State

DOCUMENT# N00000005931

Entity Name: SHOWERS OF LEARNING CHRISTIAN CHILD CARE CENTER, INC.

Current Principal Place of Business:

2615 SE 15 STREET
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

2615 SE 15 STREET
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 59-3667675 **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:

KING, LINDA A
SHOWERS OF LEARNING CHRISTIAN C C C, INC
2615 SE 15 STREET
GAINESVILLE, FL 32641 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:	PD	( ) Delete
Name:	KING, LINDA A	
Address:	1702 NE 15TH TERRACE	
City-St-Zip:	GAINESVILLE, FL 32609	
Title:	VD	( ) Delete
Name:	KING, JR., WILLIE L	
Address:	1702 NE 15TH TERRACE	
City-St-Zip:	GAINESVILLE, FL 32609	
Title:	S	( ) Delete
Name:	WORD, KELLI L	
Address:	1505 FT. CLARK BLVD. #17-203	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	T	( ) Delete
Name:	HARRIS, EDWARD B	
Address:	7251 SW 18TH PLACE	
City-St-Zip:	GAINESVILLE, FL 32609	
Title:	M	( ) Delete
Name:	WILLIAMS, DEBRA L	
Address:	1115 N.E. 26TH COURT	
City-St-Zip:	GAINESVILLE, FL 32641	

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

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: LINDA A. KING CEO 07/06/2006

Electronic Signature of Signing Officer or Director — Date