2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007264

Entity Name: T AND T LEARNING CENTER, INC.

FILED Jan 22, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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231 S. DIXIE HIGHWAY POMPANO, FL 33060

Current Mailing Address: New Mailing Address:

616 NW 21ST COURT POMPANO BEACH, FL 33060

FEI Number: 65-1053209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134 US

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:

Flateria Circular of Decideral Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: SD (X) Change () Addition Name: GLENN, JIMMY Name: NOE, LAURA MRS.

Address: 416 NORTHWEST 9TH AVENUE Address: 2851 NE 46TH STREET

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: LIGHTHOUSE POINT, FL 33441

Title: PD () Delete Title: PD (X) Change () Addition Name: CAMPFIELD, MINNIE Name: JONES, JAMES L MR.

Address: 616 NW 21ST COURT Address: 1595 NW 7TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

Title: TD () Delete Title: TD (X) Change () Addition Name: JONES, JOHN Name: POITIER, WOODROW J MR.

Address: 416 NORTHWEST 9TH AVENUE Address: 901 NW 4TH AVENUE

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33060

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

 Name:
 LAWS, MARSHA
 Name:
 LARKINS, E. PAT MR.

 Address:
 416 NORTHWEST 9TH AVENUE
 Address:
 1534 NW 4TH AVENUE

 City-St-Zip:
 POMPANO BEACH, FL 33060
 City-St-Zip:
 POMPANO BEACH, FL 33060

Title: D () Delete Title: D (X) Change () Addition Name: JONES, JAMES L Name: HAYWOOD, JACQUELYN B MRS.

 Address:
 1595 NW 7TH AVE
 Address:
 1400 NW 6TH STREET

 City-St-Zip:
 POMPANO BEACH, FL 33060
 City-St-Zip:
 POMPANO BEACH, FL 33060

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: MINNIE CAMPFIELD EXEC 01/22/2006

Electronic Signature of Signing Officer or Director

Date