

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007264

FILED
Feb 10, 2009
Secretary of State

Entity Name: T AND T LEARNING CENTER, INC.

Current Principal Place of Business:

231 S. DIXIE HIGHWAY
POMPANO, FL 33060

New Principal Place of Business:

Current Mailing Address:

616 NW 21ST COURT
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 65-1053209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: SD () Delete
Name: NOE, LAURA MRS.
Address: 2851 NE 46TH STREET
City-St-Zip: LIGHTHOUSE POINT, FL 33441

Title: PD () Delete
Name: JONES, JAMES L MR.
Address: 1595 NW 7TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD () Delete
Name: POITIER, WOODROW J MR.
Address: 901 NW 4TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: V () Delete
Name: LARKINS, E. PAT MR.
Address: 1534 NW 4TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: HAYWOOD, JACQUELYN B MRS.
Address: 1400 NW 6TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

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 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

DIR

02/10/2009

Electronic Signature of Signing Officer or Director

Date