

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007967

FILED
Mar 18, 2009
Secretary of State

Entity Name: TOMOKA LEARNING TREE, INC.

Current Principal Place of Business:

1151 WEST GRANADA BLVD.
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1151 WEST GRANADA BLVD.
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3759338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERCE, DAVE
210 S BEACH ST #200
DAYTONA, FL 32114 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: RATHER, PHILIP
Address: 1151 W GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: KERCE, DAVE
Address: 2127JOHN ANDERSON DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: DAVIDSON, JUDY
Address: 1151 WEST GRANADA BLVD.
City-St-Zip: ORMOND BEACH, FL 32174

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:

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: PHILIP RATHER

D

03/18/2009

Electronic Signature of Signing Officer or Director

Date