

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000682

FILED
Apr 30, 2005
Secretary of State

Entity Name: THE LEARNING CURVE, INC.

Current Principal Place of Business:

10516 TREADWAY SCHOOL RD.
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

10516 TREADWAY SCHOOL RD.
LEESBURG, FL 34788

New Mailing Address:

FEI Number: 04-3589149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARY, CYNTHIA
37711 CR 439
EUSTIS, FL 32736 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: VARY, CYNTHIA
Address: 37711 CR 439
City-St-Zip: EUSTIS, FL 32736

Title: D () Delete
Name: PAULEY, JANET
Address: 16040 LONELY LANE RD.
City-St-Zip: UMATILLA, FL 32784

Title: D () Delete
Name: LANTZ, TIM
Address: 618 CATHCART AVE.
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: WILLIAMS, TERESA
Address: 7144 DUDLEY AVE
City-St-Zip: MT DORA, FL 32757

Title: D () Delete
Name: BERNARD, JO
Address: 5005 CITY STREET, APT. #1336
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: VAN DERZEE, KEITH
Address: 36540 VIA MARCIA
City-St-Zip: FRUITLAND PARK, FL 34731

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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 Section 119.07(3)(i), 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: CYNTHIA VARY

D

04/30/2005

Electronic Signature of Signing Officer or Director

Date