2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005147

Entity Name: LEARNING COOPERATIVE, INC.

FILED Jan 12, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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650 SEMINOLE BLVD. LARGO, FL 33770

Current Mailing Address: New Mailing Address:

650 SEMINOLE BLVD. LARGO, FL 33770

FEI Number: 51-0417707 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:

TUTHILL, DOUGLAS M

650 SEMINOLE BLVD.

LARGO, FL 33770 US

MOORE, JADE T
94 BAYWOOD AVENUE
CLEARWATER, FL 33765 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: JADE T MOORE 01/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: CEO () Delete Title: CEO (X) Change () Addition

Name:MCMAHON, ROBERT AName:MOORE, JADEAddress:117 COUNTRY VILLAS DRIVEAddress:94 BAYWOOD AVENUECity-St-Zip:SAFETY HARBOR, FL 34695City-St-Zip:CLEARWATER, FL 33765

Title: TD (X) Delete Title: () Change () Addition

 Name:
 MOORE, JADE T
 Name:

 Address:
 94 BAYWOOD AVENUE
 Address:

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:

Title: PD () Delete Title: CFO (X) Change () Addition

Name:TUTHILL, DOUGLAS MName:DENNARD, MICHELLEAddress:2421 GREEN WAY SOUTHAddress:3616 CARMEN STREETCity-St-Zip:ST. PETERSBURG, FL 33712City-St-Zip:TAMPA, FL 33609

Title: SD () Delete Title: () Change () Addition

 Name:
 BACON, LINDA A
 Name:

 Address:
 11750 OLD GEORGETOWN RD. #2240
 Address:

 City-St-Zip:
 N. BETHESDA, MD 20852
 City-St-Zip:

Title: VD (X) Delete Title: () Change () Addition

 Name:
 DENNARD, MICHELLE
 Name:

 Address:
 3616 CARMEN STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33609
 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: MICHELLE DENNARD CFO 01/12/2006

Electronic Signature of Signing Officer or Director

Date