

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000008090

FILED
May 23, 2006
Secretary of State

Entity Name: YOUNG EINSTEINS DEVELOPMENT CENTER, INC.

Current Principal Place of Business:

8212 CHEMSTRAND RD
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

1661 EAGLE ST
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 11-3657366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JEFFERSON, CURTIS
1661 EAGLE ST
CAANTONMENT, FL 32533 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: CURTIS JEFFERSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JEFFERSON, CURTIS
Address: 1661 EAGLE ST
City-St-Zip: CANTONMENT, FL 32533

Title: TTT () Delete
Name: PUNTOY, LATRINA
Address: 829 BOOKER AVE
City-St-Zip: CANTONMENT, FL 32533

Title: STT () Delete
Name: MOORE, CYNTHIA
Address: 424 MORGAN DR
City-St-Zip: CANTONMENT, FL 32533

Title: TD () Delete
Name: HARRIS, BARBARA
Address: 1040 SAWYER STREET
City-St-Zip: PENSACOLA, FL 32534

Title: D () Delete
Name: HOOKS, PATRICIA A
Address: 2545 ROSEDOWN DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: SD () Delete
Name: JOHNSON, FRANCES
Address: 1548 KYLE DRIVE
City-St-Zip: PENSACOLA, FL 32505

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
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 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: CYNTHIA MOORE

SST

05/23/2006

Electronic Signature of Signing Officer or Director

Date