2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006561

FILED Apr 28, 2006 Secretary of State

Entity Name: SPEAK EASY EARLY LANGUAGE DEVELOPMENT AND LEARNING CENTER, INC.

Current Principal Place of Business:				New Principal Place of Business:			
3970 N.W. MIAMI GAR	167TH ST. RDENS, FL 3	3055					
Current Mailing Address:				New Mailing Address:			
5018 S W 168TH AVENUE MIRAMAR, FL 33027							
FEI Number:	51-0477680	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Sta	tus Desired ()
Name and	Address of (Current Registered Agent:		Name and	Address of	FNew Registered	Agent:
BEASLEY, 5018 S.W. MIRAMAR,	168TH AVE.	US					
The above in the State		submits this statement for the	purpose o	f changing it	s registered	l office or registere	ed agent, or both,
SIGNATUR	E:						
	Electro	nic Signature of Registered Ag	ent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PDS (BEASLEY, MA 5018 S.W. 168 MIRAMAR, FL	STH AVE.		Title: Name: Address: City-St-Zip:		()Change ()Additio	on
Title: Name: Address: City-St-Zip:	VD (JABALI, WARF 5018 S.W. 168 MIRAMAR, FL	BTH AVE.		Title: Name: Address: City-St-Zip:	,	()Change ()Additio	on
Title: Name: Address: City-St-Zip:	D (BRYANT, GWE 8937 N.W. 194 MIAMI, FL 330	TERR.		Title: Name: Address: City-St-Zip:		()Change ()Additio	on
Title: Name: Address: City-St-Zip:	D (CROSKEY, LU 1610 N.W. 170 MIAMI, FL 331	TERR.		Title: Name: Address: City-St-Zip:	,	()Change ()Additio	on
Title: Name: Address: City-St-Zip:	D (DOLAN, GERR 1292 N.E. 105 MIAMI SHORE	TH ST.		Title: Name: Address: City-St-Zip:	GILBERT, JA 20883 N W 1	(X) Change()Additio NICE 19TH STREET PINES, FL 33029	n
Title: Name: Address: City-St-Zip:	T (MARTIN, LORI 13047 S W 21 MIRAMAR, FL	STREET		Title: Name: Address: City-St-Zip:	,	() Change () Additio	on

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: MARY BEASLEY P 04/28/2006