2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2008
Secretary of State

DOCUMENT# N03000009167

Entity Name: NATIONAL INSTITUTE FOR INNOVATIVE LEADERSHIP IN EARLY EDUCATION AND CARE, INC.

Current Principal Place of Business:

1230 NE 201 TERRACE
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

1230 NE 201 TERRACE
MIAMI, FL 33179

New Mailing Address:

FEI Number: 56-2036688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LUNDGREN, MURIEL W
1230 NE 201 TERRACE
MIAMI, FL 33179 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: P ( ) Delete
Name: LUNDGREN, MURIEL W
Address: 1230 NE 201 TERRACE
City-St-Zip: MIAMI, FL 33179

Title: ST ( ) Delete
Name: GENNETT, NICK
Address: P.O. BOX 1595
City-St-Zip: SAILSBURY, NC 28145

Title: D ( ) Delete
Name: SEJECK, ANA
Address: 3250 SW 3RD AVENUE
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete
Name: HERNANDEZ, LUIS
Address: 3790 IRVINGTON AVENUE
City-St-Zip: MIAMI, FL 33133

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
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: MURIEL WONG LUNDGREN P 09/03/2008

Electronic Signature of Signing Officer or Director — Date