

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 22, 2005
Secretary of State

DOCUMENT# N04000000978

Entity Name: NEW VISION CHILD ACADEMY, INC.

Current Principal Place of Business:1771 BANYAN CREEK CIRCLE NORTH
BOYNTON BEACH, FL 33436**New Principal Place of Business:**13602 LA MIRADA CIRCLE
WELLINGTON, FL 33414**Current Mailing Address:**1771 BANYAN CREEK CIRCLE NORTH
BOYNTON BEACH, FL 33436**New Mailing Address:**13602 LA MIRADA CIRCLE
WELLINGTON, FL 33414

FEI Number: 65-1225238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MACDONALD, RHONDA L
1771 BANYAN CREEK CIRCLE NORTH
BOYNTON BEACH, FL 33436 US**Name and Address of New Registered Agent:**DOLAN, DEBRA W
13602 LA MIRADA CIRCLE
WELLINGTON, FL 33414 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: DEBRA W. DOLAN

03/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: DOLAN, DEBRA W
Address: 13602 LA MIRADA CIRCLE
City-St-Zip: WELLINGTON, FL 33414Title: D () Delete
Name: FAIRBANKS, SHAREN M
Address: 241 WOODLAND ROAD
City-St-Zip: PALM SPRINGS, FL 33461Title: D () Delete
Name: MACDONALD, RHONDA L
Address: 1771 BANYAN CREEK CIRCLE NORTH
City-St-Zip: BOYNTON BEACH, FL 33436Title: D (X) Delete
Name: ECHELBERGER, CLAUDIA B
Address: 909 LAKE SHORE DRIVE #212
City-St-Zip: LAKE PARK, FL 33403Title: D (X) Delete
Name: HAYDEN, JOANNE
Address: 13770 CHATSWORTH VILLAGE DRIVE
City-St-Zip: WELLINGTON, FL 33414**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: ECHELBERGER, CLAUDIA B
Address: 909 LAKE SHORE DRIVE #212
City-St-Zip: LAKE PARK, FL 33403Title: () 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 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: DEBRA W. DOLAN

D

03/22/2005

Electronic Signature of Signing Officer or Director

Date