2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010528

FILED Apr 30, 2009 Secretary of State

Entity Name: Y.L.T. CHILD DEVELOPMENT AND LEARNING CENTER INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
Current Mailing Address:		New Mailing Addres	ss:	
: 35-2245782	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
l Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
ANGE, FL 32	2127 US	ourpose of changing its register	ed office or registered agent, or both,	
RE:				
Electro	onic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
TURNER, JAN 100 SKYFLO	MES WER CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
TURNER, ALF 100 SKYFLO	FREDA M WER CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
BROWN, BER 100 SKY FLO	RNARD WER CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
BROWN, DOI 100 SKY FLO	ROTHY WER CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
PYLES, MAR 100 SKY FLC	Y ['] K WER CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
FIELDS, EDN	A WER CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
	AR HIGHLAN BEACH, FL Iailing Addre AR HIGHLAN BEACH, FL : 35-2245782 I Address of DANIEL S TLE CREEK ANGE, FL 32 e named entity of Florida. RE: Electro S AND DIRE P (TURNER, JAN 100 SKYFLO DAYTONA BE VP (TURNER, ALF 100 SKYFLO DAYTONA BE D (BROWN, BEF 100 SKY FLO DAYTONA BE D (PYLES, MAR 100 SKY FLO DAYTONA BE D (PYLES, MAR 100 SKY FLO DAYTONA BE D (PYLES, MAR 100 SKY FLO DAYTONA BE D (FIELDS, EDN 100 SKY FLO DAYTONA BE	AR HIGHLANDS BLVD ABEACH, FL 32117 US lailing Address: AR HIGHLANDS BLVD ABEACH, FL 32117 US : 35-2245782 FEI Number Applied For () I Address of Current Registered Agent: DANIEL S TLE CREEK DR. ANGE, FL 32127 US e named entity submits this statement for the period of Florida. RE: Electronic Signature of Registered Age S AND DIRECTORS: P () Delete TURNER, JAMES 100 SKYFLOWER CIRCLE DAYTONA BEACH, FL 32117 US VP () Delete BROWN, BERNARD 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete PYLES, MARY K 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete FIELDS, EDNA 100 SKY FLOWER CIR	AR HIGHLANDS BLVD ABEACH, FL 32117 US Itailing Address: AR HIGHLANDS BLVD ABEACH, FL 32117 US Sa5-2245782 FEI Number Applied For () FEI Number Not Applicable () It Address of Current Registered Agent: DANIEL S TLE CREEK DR. ANGE, FL 32127 US In amed entity submits this statement for the purpose of changing its registere of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: P () Delete TURNER, JAMES 100 SKYFLOWER CIRCLE DAYTONA BEACH, FL 32117 US VP () Delete TURNER, ALFREDA M 100 SKYFLOWER CIRCLE DAYTONA BEACH, FL 32117 FL D () Delete BROWN, BERNARD 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete BROWN, DOROTHY 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete PYLES, MARY K 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete FIELDS, MARY K 100 SKY FLOWER CIR DAYTONA BEACH, FL 32117 D () Delete FIELDS, ENAN Name: Address: City-St-Zip: D () Delete FIELDS, EDNA Name: Haddress: Name: Address: City-St-Zip: D () Delete FIELDS, EDNA Name: Haddress: Name: Address: City-St-Zip: D () Delete FIELDS, EDNA Name: Haddress: Name: Haddress: Name: Haddress: Name: Haddress: Name: Haddress: Haddress	

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: ALFREDA M. TURNER VP 04/30/2009