

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008335

FILED  
Jan 23, 2007  
Secretary of State

Entity Name: THE LEARNING CENTER OF KEY WEST, INC.

## Current Principal Place of Business:

241 TRUMBO ROAD  
KEY WEST, FL 33040

## New Principal Place of Business:

## Current Mailing Address:

241 TRUMBO ROAD  
KEY WEST, FL 33040

## New Mailing Address:

FEI Number: 20-5416637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLISON, JOHN R III  
241 TRUMBO ROAD  
KEY WEST, FL 33040 US

## Name and Address of New Registered Agent:

FRASER, SCOTT  
241 TRUMBO ROAD  
KEY WEST, FL 33040 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: SCOTT FRASER

01/23/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: REYNOLDS, RYLER  
Address: 6805 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050

Title: VD ( ) Delete  
Name: DEAN, ROBERT  
Address: 6805 OVERSEAS HIGHWAY  
City-St-Zip: MARATHON, FL 33050

Title: STD ( ) Delete  
Name: LOPEZ, PALMA  
Address: 326 AMELIA STREET  
City-St-Zip: MARATHON, FL 33040

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOPEZ, PALMA  
Address: 326 AMELIA ST.  
City-St-Zip: KEY WEST, FL 33040

Title: D (X) Change ( ) Addition  
Name: BLAYLOCK, VIRGINIA  
Address: 241 TRUMBO ROAD  
City-St-Zip: KEY WEST, FL 33040

Title: STD (X) Change ( ) Addition  
Name: FRASER, SCOTT  
Address: P.O. BOX 4215  
City-St-Zip: KEY WEST, FL 33041

Title: VD ( ) Change (X) Addition  
Name: LEGGETT, JOAN  
Address: 241 TRUMBO ROAD  
City-St-Zip: KEY WEST, FL 33040

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: SCOTT FRASER

STD

01/23/2007

Electronic Signature of Signing Officer or Director

Date