## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000001791

Entity Name: GIANT LEAP LEARNING CENTER, INC.

FILED Jan 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3925 GRISSOM PKWY. COCOA, FL 329263669

Current Mailing Address: New Mailing Address:

3925 GRISSOM PKWY. COCOA, FL 329263669

FEI Number: 20-8524003 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 CRAIG, PETRA
 CRAIG, PETRA

 3925 NGRISSOM PKWY
 3925 GRISSOM PKWY

 COCOA, FL 329263669 US
 COCOA, FL 32926 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: 01/21/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 CRAIG, PETRA
 Name:
 CRAIG, PETRA

 Address:
 3925 GRISSOM PKWY.
 Address:
 3925 GRISSOM PKWY.

 City-St-Zip:
 COCOA, FL 329263669
 City-St-Zip:
 COCOA, FL 32926

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: CRAIG, RICHARD Name: CRAIG, RICHARD

 Name:
 CRAIG, RICHARD
 Name:
 CRAIG, RICHARD

 Address:
 3925 GRISSOM PKWY.
 Address:
 3925 GRISSOM PKWY.

 City-St-Zip:
 COCOA, FL 329263669
 City-St-Zip:
 COCOA, FL 32926

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SNYDER, JAMES
 Name:
 ADKINS, DON

 Address:
 3925 GRISSOM PKWY.
 Address:
 2010 N. US 1

 City-St-Zip:
 COCOA, FL 329263669
 City-St-Zip:
 COCOA, FL 32923

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: PETRA A. CRAIG D 01/21/2008