

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000002858

FILED
Oct 19, 2009
Secretary of State

Entity Name: VINSON'S EARLY LEARNING PRESCHOOL, INC.

Current Principal Place of Business:

3763 RECKER HIGHWAY
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

3763 RECKER HIGHWAY
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 20-8762146 **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:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: CHARLENE VINSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: VINSON, CHARLENE
Address: 3763 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVPS () Delete
Name: VINSON, ANTONEYO
Address: 3763 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Delete
Name: VINSON, ANTONEYO
Address: 3763 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: VINSON, NASHAY
Address: 3763 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

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: CHARLENE VINSON

DP

10/19/2009

Electronic Signature of Signing Officer or Director

Date