

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000005197

**FILED**  
**Jun 14, 2011**  
**Secretary of State**

**Entity Name:** LITTLE LEAPERS CHILDCARE/PERFORMING ARTS ACADEMY, INC.

**Current Principal Place of Business:**

3631 NW 2ND STREET  
LAUDERHILL, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 120184  
FT LAUDERDALE, FL 33312

**New Mailing Address:**

**FEI Number:** 38-3784758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILSON, SANDRA M  
3631 NW 2ND STREET  
LAUDERHILL, FL 33311 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WILSON, SANDRA M  
**Address:** 3631 NW 2ND STREET  
**City-St-Zip:** LAUDERHILL, FL 33311

**Title:** VP  
**Name:** WILSON, IVORY L  
**Address:** 3631 NW 2ND STREET  
**City-St-Zip:** LAUDERHILL, FL 33311

I hereby 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 all other like empowered.

**SIGNATURE:** SANDRA WILSON

PRES

06/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date