## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000011623

Address:

City-St-Zip:

BONITA SPRINGS, FL 34135

FILED Feb 07, 2009 Secretary of State

Entity Name: LEARNSUMMER, INC. **Current Principal Place of Business: New Principal Place of Business:** 1010 GROVE DRIVE NAPLES, FL 34120 **Current Mailing Address: New Mailing Address:** 1010 GROVE DRIVE NAPLES, FL 34120 FEI Number: 26-3973225 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: SCALLAN, ROBERT 1010 GROVE DRIVE NAPLES, FL 34120 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SCALLAN, ROBERT Name: Name: Address: 1010 GROVE DRIVE Address: City-St-Zip: NAPLES, FL 34120 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCALLAN, LISA Name: Address: 1010 GROVE DRIVE Address: City-St-Zip: NAPLES, FL 34120 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition DOWNEY, BRIAN J ESQ Name: RIVERA, AMAURY Name: 28100 BONITA GRANDE DR. #102 550 8TH ST. SW

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.

Address:

City-St-Zip:

NAPLES, FL 34120

SIGNATURE: ROBERT SCALLAN **PRES** 02/07/2009