

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 05, 2011
Secretary of State

DOCUMENT# N10000002887

Entity Name: MALONE DEVELOPMENTAL LEARNING CENTER, INC.**Current Principal Place of Business:**5942 SONORA DRIVE WEST
JACKSONVILLE, FL 32244**New Principal Place of Business:****Current Mailing Address:**5942 SONORA DRIVE WEST
JACKSONVILLE, FL 32244**New Mailing Address:****FEI Number:** 30-0638987**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MALONE, YVETTE D
5942 SONORA DRIVE WEST
JACKSONVILLE, FL 32244 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: PRES
Name: YVETTE, MALONE
Address: 5942 SONORA DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP
Name: ALAYDI, ADAM
Address: 6610 NORTH MAIN STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: SEC
Name: LUCY, KHAMASHTA
Address: 11368 NETTLE BROOK STREET E.
City-St-Zip: JACKSONVILLE, FL 32218

Title: TREA
Name: JAMES, RENTZ
Address: 618 CENTER STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: CHAP
Name: LOGAN, EUGENE
Address: 1251 BECKNER AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

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: YVETTE MALONE

PRES

04/05/2011

Electronic Signature of Signing Officer or Director

Date