

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001281

FILED  
Mar 14, 2012  
Secretary of State

**Entity Name:** HAPPY WORKERS LEARNING CENTER, INC.

**Current Principal Place of Business:**

920 19TH ST S  
ST PETERSBURG, FL 33712 US

**New Principal Place of Business:**

**Current Mailing Address:**

920 19TH ST S  
ST PETERSBURG, FL 33712 US

**New Mailing Address:**

**FEI Number:** 27-4826221

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARRISH, ANGELA  
224 26TH AVE N  
ST PETERSBURG, FL 33704 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:** PARRISH, ANGELA  
**Address:** 224 26TH AVENUE N  
**City-St-Zip:** ST PETERSBURG, FL 33704 US

**Title:** VP  
**Name:** SCRUGGS-WESTON, MARIA  
**Address:** 980 MELROSE AVENUE SOUTH  
**City-St-Zip:** ST PETERSBURG, FL 33705 US

**Title:** S  
**Name:** MICHAEL, GAIL  
**Address:** 792 31ST AVENUE NE  
**City-St-Zip:** ST PETERSBURG, FL 33704 US

**Title:** T  
**Name:** EPPSTEINER, FREDRIC A  
**Address:** 224 26TH AVENUE N  
**City-St-Zip:** ST PETERSBURG, FL 33704 US

**Title:** D  
**Name:** THORNTON, AL  
**Address:** 757 HARBOR DRIVE S  
**City-St-Zip:** ST PETERSBURG, FL 33705 US

**Title:** D  
**Name:** DUCKETT, GREGORY  
**Address:** 1500 ALHAMBRA WAY SO  
**City-St-Zip:** ST PETERSBURG, FL 33705

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:** ANGELA PARRISH

P

03/14/2012

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

\_\_\_\_\_  
Date