## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

**SIGNATURE:** 

## Aug 17, 2005 8:00 am Secretary of State **DOCUMENT # N26254** 08-17-2005 90001 026 \*\*\*\*70.00 EARLY YEARS LEARNING CENTER OF GAINESVILLE, Principal Place of Business Mailing Address 3146 N.W. 13TH STREET C/O LINDA ANDREWS 50061975 GAINESVILLE, FL 32609 3146 N.W. 13TH STREET GAINESVILLE, FL 32609 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08112005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-2890729 Applied For Not Applicable Zip Country Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ANDREWS, LINDA 3146 N.W. 13TH STREET Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE, FL 32609 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 9. Election Campaign Financing filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Due by September 7, 2005 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DΡ TITLE ☐ Delete TITLE DP Linda Andrews ANDREWS, LINDA NAME 1105 Fort Clarke Blvd. #1301 Camusnile Fl. 33606 NAME 6980 BAHAIA ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OCALA, FL 34472 CITY-ST-70P DP TITLE ☐ Detete TITLE 🗌 Çhange ☐ Addition ANDREWS, LINDA NAME NAME STREET ADDRESS 6980 BAHAIA ROAD STREET ADDRESS CITY-ST-ZIP OCALA, FL 34472 CITY-ST-ZIP Mary Ann Snead 29210 NW 122nd street Delete ΠΠF TITLE ☐ Change Addition CRONIN, KARI NAME NAME STREET ADDRESS 6115 NW 90TH ST STREET ADDRESS 32615 Alachua, Fl. CITY-ST-ZIP GAINESVILLE, FL 32653 CITY-ST-ZIP Layla Ward 3148 NW 14tern TITLE ☐ Delete TITLE D TH Change ■ Addition WARD, LAYLA NAME NAME STREET ADORESS 5820 SW 85TH ST. STREET ADDRESS Garnesville F1. 32606 CHY-ST-ZIP GAINESVILLE, FL 32608 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all after like empowered.

FILED

2005 NOT-FOR-PROFIT CORPORATION
\_\_\_\_ANNUAL REPORT (AR) \_\_\_\_

mailed 2/4/05

DOCUMENT # N26254  1. Entity Name				ATTACUME	ATTACHMENT	
EARLY YE	EARS LEARNING CENTER (	OF GAINESVILLE,		ALIACHIVIC		
Principal Place	e of Business	Mailing Address				
3146 N.W. 13TH STREET GAINESVILLE FL 32609		C/O LINDA ANDREWS 3146 N.W. 13TH STREET GAINESVILLE FL 32609		50	06/975=	
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE	CR2E037 (10/04)	
City & State		City & State		4. FEI Number 59-2890	729 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desire	sd \$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of Ne	w Registered Agent	
ANDREWS, LINDA						
3146 N.W. 13TH STREET GAINESVILLE FL 32609			Street A	Street Address (P.O. Box Number is Not Acceptable)		
	•		City		FL Zip Code	
8. The above the obligate SIGNATURE	ions of registered agent.	triduceus .		1/2	of Florida. I am familiar with, and accept	
	Sgnature, typed or printed name of registered agent FILE NOW FEE 18:\$6, 25 Due By May 1, 2005	9. Election Cam Trust Fund Co	paign Financing	Added to Fees	Make Check Payable to orida Department of State	
10.	OFFICERS AND DI		11.	ADDITIONS/CHANGES TO OFF		
TITLE	ANDREWS, LINDA	☐ Deteta	TITLE NAME		Change Addition	
STREET ADDRESS	6980 BAHAIA ROAD		STREET ADDRESS			
CITY-ST-ZIP	OCALA FL 34472		CITY-ST-ZIP			
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS	ANDREWS, LINDA 6980 BAHAIA ROAD		NAME			
CITY - ST - ZIP	AND DUINIUM HOUR					
	OCALA FL 34472		STREET ADDRESS CITY-ST-ZIP		,	
TITLE	T	Delata	CITY-ST-ZIP	Maniagn Soead	Change (S Addition	
NAME	T CRONIN, KARI	Celeta	CITY-ST-ZIP TITLE NAME	Maryann Snead	Change Maguillon	
TITLE NAME STREET ADDRESS	T CRONIN, KARI 6115 NW 90TH ST	Poleta	CITY-ST-ZIP TITLE NAME STREET ADDRESS	39 AID NW	122rd Street	
NAME	T CRONIN, KARI		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	39 AID NW	122 rd Street Fl. 32105	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CRONIN, KARI 6115 NW 90TH ST GAINESVILLE FL 32653 D WARD, LAYLA	Celeta Deleta	CITY-ST-ZIP TITLE NAME STREET ADDRESS	39 AID NW	122rd Street	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	T CRONIN, KARI 6115 NW 90TH ST GAINESVILLE FL 32653 D WARD, LAYLA 5820 SW 85TH ST.		CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	39 AID NW	122 rd Street Fl. 32105	
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ING OFFICER OR DIRECTOR

SIGNATURE: