2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27207

FILED Apr 15, 2009 Secretary of State

Entity Name: ORLANDO DAY NURSERY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

626 LAKE DOT CIRCLE ORLANDO, FL 32801 US

Current Mailing Address: New Mailing Address:

626 LAKE DOT CIRCLE ORLANDO, FL 32801 US

FEI Number: 59-0651096 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:

NOTICE, LORRAINE A
626 LAKE DOT CIRCLE
ORLANDO, FL 32801 US

NOTICE, LORRAINE A
626 LAKE DOT CIRCLE
ORLANDO, FL 32801 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: LORRAINE A NOTICE 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: NOTICE, LORRAINE Name: MURDOCK, JOHN R

Address: 1163 FOX FOREST CIRCLE Address: 124 CHANNEL DRIVE
City-St-Zip: APOPKA, FL 32712 City-St-Zip: LAKE MARY, FL 32746

Title: VP () Delete Title: T (X) Change () Addition Name: BURNS, ROBERT Name: CRAIN, SHANE

Address: 392 ROBYNS GLEN ROAD Address: 14232 MAILER BLVD City-St-Zip: OCOEE, FL 34761 City-St-Zip: ORLANDO, FL 32828

Title: T () Delete Title: RS (X) Change () Addition
Name: AHL, RICHARD A JR Name: NOTICE, LORRAINE A

Address: 920 MOSS LANE Address: 1163 FOXFORREST CIRCLE
City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: APOPKA, FL 32712

Title: S () Delete Title: D (X) Change () Addition Name: BURNS, ROBERT II Name: AHL, RICHARD A JR

 Name:
 BURNS, ROBERT II
 Name:
 AHL, RICHARD A JR

 Address:
 392 ROBYNS GLEN ROAD
 Address:
 920 MOSS LANE

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:
 WINTER PARK, FL 32789

City-St-Zip: OCOEE, FL 34761 City-St-Zip: WINTER PARK, FL 32789

Title: TE () Delete Title: D (X) Change () Addition Name: CRAIN, SHANE Name: GREEN, MICHAEL L

Address: 14232 MAILER BLVD Address: 450 S ORANGE AVE, 4TH FLOOR

City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32801

Title: () Delete Title: ED () Change (X) Addition Name: ZINDLER, PATRICIA A

 Name:
 Name:
 ZINDLER, PATRICIA A

 Address:
 Address:
 1601 TRIANGLE AVE

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32806

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.

SIGNATURE: PATRICIA ZINDLER ED 04/15/2009