## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003861

Entity Name: MORNINGSTAR LEARNING CENTER INC.

FILED Jan 06, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8200 BEE RIDGE RD SARASOTA, FL 34241 **Current Mailing Address: New Mailing Address:** P O BOX 5502 SARASOTA, FL 342775502 FEI Number: 59-3376870 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLLAND, JACQUELIN D 3569 SAULSTARS CT SARASOTA, FL 34232 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: (X) Change ( ) Addition () Delete JACQUELIN D. HOLLAND, JACQUELIN D. HOLLAND, Name: Name: 2825 PINECREST ST Address: 3569 SAULSTARS COURT Address: City-St-Zip: SARASOTA, FL City-St-Zip: SARASOTA, FL 34232 Title: VD Title: (X) Change ( ) Addition ( ) Delete Name: STANLEY DITCHFIELD, Name: STANLEY DITCHFIELD, Address: 7173 W. COUNTRY CLUB DR. N. APT. 141 Address: 3544 SAULSTARS COURT City-St-Zip: SARASOTA, FL 34243 City-St-Zip: SARASOTA, FL 34232 Title: TMS () Delete Title: () Change () Addition MAYERHOFER, MAXIMILLIAN M Name: Name: Address: 3568 SAULSSTARS CT Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: ( ) Delete Title: () Change () Addition GIANCOLI, WENDY Name: Name: 1616 ADAMS DR W Address: Address: City-St-Zip: SUFFOLK, VA 23433 City-St-Zip: Title: (X) Delete Title: () Change () Addition KUTINSKY, DONNA Name: Name: 1121 HONORE AVE Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: () Delete Title: () Change () Addition MEACHAM, DEBORAH R Name: Name: Address: 3569 SAULSTARS COURT Address: SARASOTA, FL 34232 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MAXIMILLIAN MAYERHOFER T 01/06/2004