

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001752

FILED
Aug 09, 2005
Secretary of State

Entity Name: AVANTE' CHILD CARE AND LEARNING CENTER, INC.

Current Principal Place of Business:

2000 EDGEWOOD AVE.
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

2000 EDGEWOOD AVE.
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 59-3433964 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BRAZIL, DEBORAH L
2000 EDGEWOOD AVE.
LEESBURG, FL 34748 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRAZILL, DEBORAH L
Address: 2000 EDGEWOOD AVE.
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: KELLY, GWENDOLYN
Address: 2000 EDGEWOOD AVE
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: MARKHAM, ALICE
Address: 2000 E EDGEWOOD AVE
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRAZILL, DEBORAH L
Address: 490 S. OLD WIRE RD
City-St-Zip: WILDWOOD, FL 34785

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DEBORAH L. BRAZILL

PD

08/09/2005

Electronic Signature of Signing Officer or Director

Date