2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000001752

FILED Apr 12, 2007 Secretary of State

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

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

2000 EDGEWOOD AVE. LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

2000 EDGEWOOD AVE. LEESBURG, FL 34748

FEI Number: 59-3433964 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:

BRAZIL, DEBORAH L
2000 EDGEWOOD AVE.
LEESBURG, FL 34748 US
GWENDOLYN, KELLEY 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: GWENDOLYN KELLEY 04/12/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BRAZILL, DEBORAH L Name: BRAZILL, DEBORAH L

 Name:
 BitAZIEE, DEBOKATE

 Address:
 490 S. OLD WIRE RD
 Address:
 2000 EDGEWOOD AVE.

 City-St-Zip:
 WILDWOOD, FL 34785
 City-St-Zip:
 LEESBURG, FL 34748

Title: D () Delete Title: () Change () Addition

 Name:
 KELLY, GWENDOLYN
 Name:

 Address:
 2000 EDGEWOOD AVE
 Address:

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:

Title: D () Delete Title: ASD (X) Change () Addition

 Name:
 MARKHAM, ALICE
 Name:
 ROBERTS, ANDREA

 Address:
 2000 E EDGEWOOD AVE
 Address:
 2000 EDGEWOOD AVE

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 LEESBURG, FL 34748

I hereby certify that the information supplied with this filing does not qualify for the 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: GWENDOLYN KELLEY D 04/12/2007