2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002113

Entity Name: LITTLE ACHIEVERS PRESCHOOL, INC.

FILED Jul 31, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
1714 DOUGLAS AVE. WEST PALM BEACH, FL 33407		3905 E REGNAS AVE. TAMPA, FL 33604
Current N	lailing Address:	New Mailing Address:
	IGLAS AVE. LM BEACH, FL 33407	PO BOX 517 PALM CITY, FL 34991
In accordan	: 65-0744670 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the corporation did	•
	AAVED CHARTERED	Name and Address of New Registered Agent:
343 ALME	WYER CHARTERED RIA AVENUE ABLES, FL 33134 US	
	e named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, or both
SIGNATUI	RE:	
	Electronic Signature of Registered A	gent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	S () Delete BABB, LAKEITHA 281 ADAMS PLACE PAHOKEE, FL 33476	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete JOHNSON, CHARLES 1280 LAKE BREEZE DR WELLINGTON, FL 33414	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete THOMAS, WENDY 8740 GLADES DRIVE, APT 59 PAHOKEE, FL 33476	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete PARKER, HENRY 871 PALM BLVD PAHOKEE, FL 33476	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete ADRIAN, HENRY 700 PALM BLVD PAHOKEE, FL 33476	Title: D (X) Change () Addition Name: JONES, VENSON Address: 3031 SEVILLE STREET City-St-Zip: PAHOKEE, FL 33476
Title: Name: Address: City-St-Zip:	D () Delete STEVENS, NORA 220 STATE MARKET ROAD PAHOKEE, FL 33476	Title: () Change () Addition Name: Address: City-St-Zip:

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: CHARLES JOHNSON P 07/31/2008