

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000642

FILED
May 18, 2007
Secretary of State

Entity Name: LOVE TO LEARN EDUCATIONAL CENTER, INC.

Current Principal Place of Business:

125 N.W. 23RD AVE
SUITE 3&4
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

4342 NW 15TH TERR
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-3552743 **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:

PALMER, LAVETTA L
4342 NW 15TH TERR
GAINESVILLE, FL 32605 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: PCD () Delete
Name: PALMER, DR. LAVETTA L
Address: 4342 NW 15TH TERR
City-St-Zip: GAINESVILLE, FL 32605

Title: DS () Delete
Name: TAYLOR, HAZEL
Address: 601 GIBSON AVE
City-St-Zip: ARCHER, FL 32618

Title: TD () Delete
Name: MITCHELL, DR. LARRY
Address: 6711 SW 63RD LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: MITCHELL, DR. BONNIE
Address: 6711 SW 63RD LANE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: LAVETTA L. PALMER, PHD

PCD

05/18/2007

Electronic Signature of Signing Officer or Director

Date