2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N99000002178

Sep 10, 2009 Secretary of State

FILED

DOCUMENT# N99000002176

Entity Name: JAY'S LEARNING CENTER I, INC. **Current Principal Place of Business: New Principal Place of Business:** 1111 NW 55TH STREET MIAMI, FL 33127 **Current Mailing Address: New Mailing Address:** 1111 NW 55TH STREET MIAMI, FL 33127 FEI Number: 65-0809764 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHN, CROCKER 10110 NORTH MIAMI AVE MIAMI SHORES, FL 33150 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOHN, CROCKER Name: Name: 10110 NORTH MIAMI AVE Address: Address: City-St-Zip: MIAMI SHORES, FL 33150 City-St-Zip: Title: Title: () Delete () Change () Addition CROCKER, CURTIS J Name: Name: Address: 1436 HUNNERSFORD Address: City-St-Zip: STONE MT, GA 30088 City-St-Zip: Title: () Delete Title: (X) Change () Addition RENEE, RUTHERFORD Name: UTHERIA, GADDIST Name: 3501 NW 173RD TERR 3501 NW 173RD TERR Address: Address: City-St-Zip: MIAMI, FL 3056 City-St-Zip: MIAMI, FL 33056 Title: VΡ (X) Delete Title: () Change () Addition Name: CROCKER, BETTY J Name: Address: 10110 N. MIAMI AVE Address: City-St-Zip: MIAMI SHORES, FL 33150 City-St-Zip: (X) Delete Title: Title: SGT () Change () Addition ALAN, FORTUNE Name: Name: 1157 NW 37TH STREET Address: Address: City-St-Zip: MIAMI, FL 33142 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: JOHN CROCKER PD 09/10/2009