2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007627

FILED Mar 23, 2009 Secretary of State

Entity Name: EARLY LEARNING COALITION OF FLORIDA'S HEARTLAND, INC.

urrent P	rincipal Place of Business:	New Principal Place of Business:
	ING WAY	
:4 PORT CHA	ARLOTTE, FL 33952	
urrent M	lailing Address:	New Mailing Address:
028 CAR	ING WAY	
4 PORTICH	ARLOTTE, FL 33952	
	:: 65-1047991 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
	,	., ,,
lame and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
028 CAR 4	ENT, ANNE HING WAY ARLOTTE, FL 33952 US	
he above	e named entity submits this statement for the	purpose of changing its registered office or registered agent, or bo
	e of Florida.	
the State		
the State		gent Date
n the State	RE:	gent Date ADDITIONS/CHANGES TO OFFICERS AND DIREC
n the State	RE:Electronic Signature of Registered Ac	
n the State SIGNATUF DFFICERS itle: lame: ddress:	RE: Electronic Signature of Registered Age S AND DIRECTORS: PD () Delete BIBLE, ANDREW 320 US HWY 27 NORTH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTION Title: () Change () Addition Name: Address:
on the State CIGNATUR DFFICERS itle: lame: ddress: itty-St-Zip: itle: lame: ddress:	RE: Electronic Signature of Registered Ag S AND DIRECTORS: PD () Delete BIBLE, ANDREW 320 US HWY 27 NORTH SEBRING, FL 33870 VD () Delete PATERNO, JOE 9530 MARKETPLACE RD UNIT 104	ADDITIONS/CHANGES TO OFFICERS AND DIRECTITIE: () Change () Addition Name: Address: City-St-Zip: Title: VD (X) Change () Addition Name: OSBORNE, ED Address: 13477 IRWIN DRIVE

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: ANNE BOUHEBENT RA 03/23/2009