

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000018119

Entity Name: THE EARLY YEARS CDC, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

5100 U.S. HWY. 98 NORTH
SUITE 10
LAKELAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

5100 U.S. HWY. 98 NORTH
SUITE 10
LAKELAND, FL 33810

New Mailing Address:

FEI Number: 59-3634389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEBOLD, TRACY L
8019 HOLLY RIDGE DRIVE
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

SIEBOLD, TRACY L
8043 HOLLY RIDGE DRIVE
LAKELAND, FL 33810 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: TRACY L. SIEBOLD

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIEBOLD, TRACY L
Address: 8019 HOLLY RIDGE DRIVE
City-St-Zip: LAKELAND, FL 33810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SIEBOLD, TRACY L
Address: 8043 HOLLY RIDGE DRIVE
City-St-Zip: LAKELAND, FL 33810

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACY L. SIEBOLD

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date