## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P01000076730

Entity Name

THE LEARNING DEPOT OF SPRING HILL, INC.



FILED Apr 26, 2007 08:00 Al Secretary of State

Principal Place of Business

11128 LIBBY RD. SPRING HILL, FL 34609 Mailing Address

11128 LIBBY RD.

SPRING HILL, FL 34609



01092007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3737182

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BRUZZI, NANCY 2388 AINSWORTH AVE. SPRING HILL, FL 34609

## DO NOT WRITE IN THIS SPACE

				114	INIS SPACE	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its register	ed office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and acc	ept
SIGNATURE.	Signature, typed or printed name of registered agent and title	il applicable. (NOYE: Registere	d Agent signature	a required when reinstaling)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar     Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000734483 05/09/07-80127-017 150.00	
10.	OFFICERS AND DIRECTORS				-L	
TITLE Name Street address City-St-Zip	VT BRUZZI, NANCY 2388 AINSWORTH AVE. SPRING HILL, FL 34609					
TITLE Name Street address City-St-Zip	P BRUZZI, DONALD 11128 LIBBY RD. SPRING HILL, FL 34609					
TITLE NAME STREET ADORESS	CFO BRUZZI, ADAM 11128 LIBBY RD.			5.0	NOT WOITE	

## DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICNATURE

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34609

dea L Bruzze P