

**FILED**  
**Jan 23, 2004 8:00 am**  
**Secretary of State**

**DOCUMENT # P02000018083**  
1. Entity Name  
MS. SUSIE'S LEARNING CENTER, INC.

<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



4. FEI Number 04-3608771	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

<b>6.-Name and Address of Current Registered Agent</b>  CONFORTI, SUZANNE 1049 JACKMAR RD. DUNEDIN, FL 34698		<b>7.-Name and Address of Now Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)   City <span style="float: right;">FL</span> Zip Code	
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SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<p><b>FILE NOW!!! FEE IS \$150.00</b>  <b>After May 1, 2004 Fee will be \$550.00</b></p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/></p>	<p><b>\$5.00</b> May Be Added to Fees</p>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>PSTD</b> <b>CONFORTI, SUZANNE</b> <b>1049 JACKMAR ROAD</b> <b>DUNEDIN, FL 34698</b> <input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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**SIGNATURE:** Suzanne Conforti SUZANNE CONFORTI 1-21-04 727-733-0388  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #