

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064301

**FILED**  
**Feb 05, 2011**  
**Secretary of State**

**Entity Name:** MISS KATHY'S EARLY LEARNING CENTER, INC.

**Current Principal Place of Business:**

2275 EAST JOHNSON AVE  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

2275 EAST JOHNSON AVE  
PENSACOLA, FL 32514

**New Mailing Address:**

FEI Number: 02-0604544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHERWIN, KATHLEEN L  
3212 WINDMILL CIRCLE  
CANTONMENT, FL 32533 US

**Name and Address of New Registered Agent:**

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:**

Title: DOP  
Name: SHERWIN, KATHLEEN L  
Address: 3212 WINDMILL CIRCLE  
City-St-Zip: CANTONMENT, FL 32533

Title: OVP  
Name: SHERWIN, PAUL H  
Address: 3212 WINDMILL CIRCLE  
City-St-Zip: CANTONMENT, FL 32533

I hereby 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 all other like empowered.

SIGNATURE: PAUL H. SHERWIN

OVP

02/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date