

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003255

FILED  
Mar 26, 2004  
Secretary of State

Entity Name: Q & L CAROUSEL LEARNING INC

## Current Principal Place of Business:

1047 NORTH LINCOLN AVE  
LAKELAND, FL 33805 US

## New Principal Place of Business:

## Current Mailing Address:

1047 NORTH LINCOLN AVE  
LAKELAND, FL 33805 US

## New Mailing Address:

PO BOX 717  
LAKELAND, FL 33802 US

FEI Number: 36-4517786

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMMONS, QUANJEANA  
1127 NORTH LAKE AVE.  
LAKELAND, FL 33805 US

## Name and Address of New Registered Agent:

SIMMONS, QUANJEANA  
5506 OLD HWY 37.  
LAKELAND, FL 33811 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:

03/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SIMMONS, QUANJEANA  
Address: 1127 NORTH LAKE AVE  
City-St-Zip: LAKELAND, FL 33805 US

Title: C,P ( ) Delete  
Name: SIMMONS, QUANJEANA  
Address: 1127 NORTH LAKE AVE  
City-St-Zip: LAKELAND, FL 33805 US

Title: VP ( ) Delete  
Name: SIMMONS, HARVEY L  
Address: 1127 NORTH LAKE AVE  
City-St-Zip: LAKELAND, FL 33805 US

Title: T,S ( ) Delete  
Name: DIXON, LULA L  
Address: 1127 NORTH LAKE AVE  
City-St-Zip: LAKELAND, FL 33805 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: QUANJEANA SIMMONS

D

03/26/2004

Electronic Signature of Signing Officer or Director

Date