2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047456

Entity Name: STEPS AHEAD LEARNING CENTER, INC.

FILED Feb 08, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1438 NORTH PINES HILLS RD ORLANDO, FL 32808

Current Mailing Address: New Mailing Address:

1438 NORTH PINES HILLS RD ORLANDO, FL 32808

FEI Number: 16-1666096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LINK, URSULA M

467 CARDINAL COURT

POINCIANNA, FL 34759 US

KEYS, CAROLYN

3606 CONNER AVE

ORLANDO, FL 32819 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: KEYS, CAROLYN 02/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition

 Name:
 LINK, URSULA M
 Name:
 KEYS, CAROLYN

 Address:
 467 CARDINAL COURT
 Address:
 3606 CONNER AVE

 City-St-Zip:
 POINCIANNA, FL 34759 US
 City-St-Zip:
 ORLANDO, FL 32819 US

 Name:
 LINK III, ALBERT
 Name:
 LINK, URSULA M

 Address:
 467 CARDINAL COURT
 Address:
 467 CARDINAL COURT

City-St-Zip: POINCIANNA COURT, FL 34759 US City-St-Zip: POINCIANNA COURT, FL 34759 US

Title: SEC (X) Delete Title: () Change () Addition

 Name:
 JOHNSON, MIDDALIA
 Name:

 Address:
 207 COLUMBIA AVENUE
 Address:

 City-St-Zip:
 OXON HILL, FL 34769 US
 City-St-Zip:

Title: TRE (X) Delete Title: () Change () Addition

 Name:
 PATTERSON, LAURA
 Name:

 Address:
 4515 SANSEBASTIAN CR
 Address:

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:

Title: VP2 (X) Delete Title: () Change () Addition

 Name:
 CLARK, OCTAVIA
 Name:

 Address:
 3529 GREENFIELD AVENUE
 Address:

 City-St-Zip:
 ORLANDO, FL 32808
 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: CAROLYN KEYS PRES 02/08/2005