

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063180

FILED
Feb 24, 2009
Secretary of State

Entity Name: LITTLE SPROUTS LEARNING CENTER, INC.

Current Principal Place of Business:

131 RIDGE RD
OAK HILL, FL 32759

New Principal Place of Business:

Current Mailing Address:

131 RIDGE RD
OAK HILL, FL 32759

New Mailing Address:

FEI Number: 20-0037520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SATURDAY, KENNETH W
131 RIDGE RD
OAK HILL, FL 32759 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SATURDAY, KENNETH W
Address: 131 RIDGE RD
City-St-Zip: OAK HILL, FL 32759

Title: VP () Delete
Name: MAHR, TRACIE
Address: 289 SATURDAY DRIVE
City-St-Zip: OAK HILL, FL 32759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SATURDAY, KENNETH W
Address: 289 SATURDAY DRIVE
City-St-Zip: OAK HILL, FL 32759

Title: DVP (X) Change () Addition
Name: SATURDAY, TRACIE M
Address: 289 SATURDAY DRIVE
City-St-Zip: OAK HILL, FL 32759

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KENNETH W SATURDAY

DP

02/24/2009

Electronic Signature of Signing Officer or Director

Date