2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077189

FILED Jan 21, 2009 Secretary of State

Entity Name: GENEVA PRESCHOOL THERAPY CENTER, INC.

New Principal Place of Business: Current Principal Place of Business: JACKSONVILLE, FL 32259 **Current Mailing Address: New Mailing Address:** 1755 SR 13 JACKSONVILLE, FL 32259 FEI Number: 14-1890455 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: HALL, LAURIE 1707 HEATHERWOOD DRIVE JACKSONVILLE, FL 32259 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HALL, LAURIE Name: Name: 1707 HEATHERWOOD DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: Title: Title: (X) Change () Addition () Delete HELGESON, MARIA Name: Name: HELGESON, MARIA 1707 HEATHERWOOD DRIVE Address: 421 BONESET BRANCH LANE Address: JACKSONVILLE, FL 32259 JACKSONVILLE, FL 32259 City-St-Zip: City-St-Zip:

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: LAURIE D. HALL VP 01/21/2009