

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147308

FILED
Apr 25, 2005
Secretary of State

Entity Name: LIVE & LEARN SCHOLASTIC CENTER, INC.

Current Principal Place of Business:

9963 SIMERSET GROVE LN
JACKSONVILLE, FL 32222

New Principal Place of Business:

6062 FILLYSIDE TRAIL
JACKSONVILLE, FL 32244

Current Mailing Address:

P O BOX 16952
JACKSONVILLE, FL 322456952

New Mailing Address:

FEI Number: 20-0806460 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JACKSON, SHERRY LOUISE
9963 SIMERSET GROVE LN
JACKSONVILLE, FL 32222 US

Name and Address of New Registered Agent:

JACKSON, SHERRY LOUISE
6062 FILLYSIDE TRAIL
JACKSONVILLE, FL 32244 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: _____

Electronic Signature of Registered Agent

04/25/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: JACKSON, SHERRY LOUISE
Address: 9963 SIMERSET GROVE LN
City-St-Zip: JACKSONVILLE, FL 32222

Title: D () Delete
Name: JACKSON, SHERRY LOUISE
Address: 9963 SIMERSET GROVE LN
City-St-Zip: JACKSONVILLE, FL 32222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: JACKSON, SHERRY LOUISE
Address: 6062 FILLYSIDE TRAIL
City-St-Zip: JACKSONVILLE, FL 32244

Title: D (X) Change () Addition
Name: JACKSON, SHERRY LOUISE
Address: 6062 FILLYSIDE TRAIL
City-St-Zip: JACKSONVILLE, FL 32244

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: SHERRY LOUISE JACKSON

D

04/25/2005

Electronic Signature of Signing Officer or Director

Date