

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000093945

FILED
Jan 07, 2008
Secretary of State

Entity Name: BROWNING LEARNING CENTER, INC.

Current Principal Place of Business:

1179 OSPREY WAY
APOPKA, FL 32712

New Principal Place of Business:

961 EASTBRIDGE DRIVE
OVIEDO, FL 32765 US

Current Mailing Address:

1179 OSPREY WAY
APOPKA, FL 32712

New Mailing Address:

961 EASTBRIDGE DRIVE
OVIEDO, FL 32765 US

FEI Number: 20-3113145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLTUN, JEFFREY M
557 NORTH WYMORE ROAD, SUITE 100
MAITLAND, FL 32751 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: JEFFREY M. KOLTUN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWNING, RONALD S
Address: 1179 OSPREY WAY
City-St-Zip: APOPKA, FL 32712

Title: VSD () Delete
Name: BROWNING, SHARON M
Address: 1179 OSPREY WAY
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: BROWNING, VICTORIA J
Address: 2799 WEST LIVE OAK LANE
City-St-Zip: LECANTO, FL 34461

Title: D () Delete
Name: BROWNING, RONALD A J
Address: 2799 WEST LIVE OAK LANE
City-St-Zip: LECANTO, FL 34461

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 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: SHARON M. BROWNING

VSD

01/07/2008

Electronic Signature of Signing Officer or Director

Date