2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141243

Entity Name: KALEIDOSCOPE LEARNING CENTER, INC.

7680 LAMPLIGHTER AVENUE

NORTH PORT, FL 34287

Address: City-St-Zip: FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14601 SOUTH TAMIAMI TRAIL NORTH PORT, FL 34287 **Current Mailing Address: New Mailing Address:** 14601 SOUTH TAMIAMI TRAIL 14601 TAMIAMI TRAIL NORTH PORT, FL 34287 NORTH PORT, FL 34287 FEI Number: 20-5850194 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: PASICK, JESSICA 7680 LAMPLIGHTER AVENUE NORTH PORT, FL 34287 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PASICK, JESSICA Name: Name: 7680 LAMPLIGHTER AVENUE Address: Address: City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: () Delete Title: Title: () Change () Addition Name: MEDINA, MILDRED Name: 7680 LAMPLIGHTER AVENUE Address: Address: NORTH PORT, FL 34287 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition PASICK, DONALD Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JESSICA PASICK P 05/01/2008