

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035247

FILED
Jan 13, 2008
Secretary of State

Entity Name: DOLPHIN SCHOOL OF LEARNING, INC.

Current Principal Place of Business:

4104 BELLASOL CIRCLE #1311
FT MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

PO BOX 60462
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 20-8558430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFKOWITZ, ELIJAH
4104 BELLASOL CIRCLE #1311
FT MYERS, FL 33916 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: P () Delete
Name: LEFKOWITZ, ELIJAH
Address: PO BOX 60462
City-St-Zip: FT MYERS, FL 33906

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: ROUBY, PORTIA
Address: P.O. BOX 60462
City-St-Zip: FT. MYERS, FL 33906

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: ELIJAH LEFKOWITZ

P

01/13/2008

Electronic Signature of Signing Officer or Director

Date