

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000077545

FILED  
Nov 13, 2008  
Secretary of State

Entity Name: ALADDAN CHRISTIAN LEARNING CENTER, INC.

## Current Principal Place of Business:

3839 DIVISION STREET  
JACKSONVILLE, FL 32209

## New Principal Place of Business:

## Current Mailing Address:

9998 LANCASHIRE DRIVE  
JACKSONVILLE, FL 32219

## New Mailing Address:

FEI Number: 26-0480045      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TURNER, DANYELLE N  
9998 LANCASHIRE DRIVE  
JACKSONVILLE, FL 32219      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: DANYELLE TURNER

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: P ( ) Delete  
Name: TURNER, DANYELLE N  
Address: 9998 LANCASHIRE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32219

Title: EXVP ( ) Delete  
Name: TURNER, JOAN F  
Address: 1215 SQUIRREL LANE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete  
Name: TURNER, AARON M SR  
Address: 1215 SQUIRREL LANE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32218

Title: SEC ( ) Delete  
Name: STRAIN, MARVIN  
Address: 411 WEST 26TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: TR ( ) Delete  
Name: TURNER, AARON M JR  
Address: 10951 NAPLES COURT NORTH  
City-St-Zip: JACKSONVILLE, FL 32218

## 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: SEC (X) Change ( ) Addition  
Name: TURNER, RAYNELL  
Address: 10951 NAPLES CT N  
City-St-Zip: JACKSONVILLE, FL 32218

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: DANYELLE TURNER

P

11/13/2008

Electronic Signature of Signing Officer or Director

Date