

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097051

Entity Name: LEARNING TIME ACADEMY, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

5301 RICKER ROAD  
JACKSONVILLE, FL 32210

## New Principal Place of Business:

## Current Mailing Address:

6318 INKBERRY  
WHITSETT, NC 27377

## New Mailing Address:

5301 RICKER ROAD  
JACKSONVILLE, FL 32210

FEI Number: 26-0832407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CALIVOSO-ROBERTS, SHEILA  
3928 CATTAIL POND DRIVE  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

CALIVOSO-ROBERTS, SHEILA  
3071 LITCHFIELD DRIVE  
ORANGE PARK, FL 32210 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: SHEILA CALIVOSO-ROBERTS

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CALIVOSO-ROBERTS, SHEILA  
Address: 6318 INKBERRY DRIVE  
City-St-Zip: WHITSETT, NC 27377

Title: VP ( ) Delete  
Name: ROBERTS, MICHAEL J  
Address: 6318 INKBERRY DRIVE  
City-St-Zip: WHITSETT, NC 27377

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CALIVOSO-ROBERTS, SHEILA  
Address: 3071 LITCHFIELD DRIVE  
City-St-Zip: ORANGE PARK, FL 32065

Title: VP (X) Change ( ) Addition  
Name: ROBERTS, MICHAEL J  
Address: 3071 LITCHFIELD DRIVE  
City-St-Zip: ORANGE PARK, FL 32065

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: SHEILA CALIVOSO ROBERTS

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date