

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097491

FILED
Apr 21, 2009
Secretary of State

Entity Name: IN-HOME TUTORING OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

614 SHANNON ROAD
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

614 SHANNON ROAD
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 26-0876974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEARS, GAIL S
614 SHANNON ROAD
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

SCOTT, JANIE W
614 SHANNON ROAD
ORLANDO, FL 32806 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: JANIE W SCOTT

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: MEARS, GAIL S
Address: 614 SHANNON ROAD
City-St-Zip: ORLANDO, FL 32806

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SCOTT, JANIE W
Address: 614 SHANNON ROAD
City-St-Zip: ORLANDO, FL 32806

Title: DIR. () Change (X) Addition
Name: MEARS, GAIL S
Address: 614 SHANNON ROAD
City-St-Zip: ORLANDO, FL 32806

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: GAIL S. MEARS

DIRE

04/21/2009

Electronic Signature of Signing Officer or Director

Date