2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# P08000043196

Entity Name: THE LEARNING TREE OF DADE COUNTY, INC.

Current Principal Place of Business:

2220 NE 203 TERRACE
MIAMI, FL 33180

New Principal Place of Business:

Current Mailing Address:

2220 NE 203 TERRACE
MIAMI, FL 33180

New Mailing Address:

FEI Number: 33-1217645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

SALFER, NICKI
2220 NE 203RD TERRACE
MIAMI, FL 33180 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: NICKI SALFER 01/20/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SALFER, NECHAMA
Address: 2220 NE. 203 TERRACE
City-St-Zip: MIAMI, FL 33180

Title: S ( ) Delete
Name: SALFER, NECHAMA
Address: 2220 NE. 203 TERRACE
City-St-Zip: MIAMI, FL 33180

Title: VP ( ) Delete
Name: ABRAMS, JUDY
Address: 2220 NE. 203 TERRACE
City-St-Zip: MIAMI, FL 33180

Title: T ( ) Delete
Name: ABRAMS, JUDY
Address: 2220 NE. 203 TERRACE
City-St-Zip: MIAMI, FL 33180

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: ( ) 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: NECHAMA SALFER PRES 01/20/2009
Electronic Signature of Signing Officer or Director Date