

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000045182

FILED
May 01, 2011
Secretary of State

Entity Name: SMALL BEGINNINGS LEARNING CENTER INC.

Current Principal Place of Business:

123 AVE K S.E.
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

123 AVE K S.E.
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 74-3212587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YARDE, SHONIA
123 AVE K S.E.
WINTER HAVEN, FL 33881 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

OFFICERS AND DIRECTORS:

Title: D/P
Name: YARDE, SHONIA
Address: 123 AVE K S.E.
City-St-Zip: WINTER HAVEN, FL 33881

Title: D/T
Name: YARDE, SHONIA
Address: 123 AVE K S.E.
City-St-Zip: WINTER HAVEN, FL 33881

Title: D/VP
Name: YARDE, DERRICK
Address: 123 AVE K S.E.
City-St-Zip: WINTER HAVEN, FL 33881

Title: S
Name: HILDEBRANDT, KATHLEEN
Address: 123 AVE K S.E.
City-St-Zip: WINTER HAVEN, FL 33881

I hereby 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 all other like empowered.

SIGNATURE: SHONIA YARDE

D/P

05/01/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date