2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000047017

FILED Apr 23, 2009 Secretary of State

Entity Name: EARLY PROMISES CHILD DEVELOPMENT CENTER, INC.

	rincipal Place	oi Pasiliess.	New Principal Place	; VI Dusiliess.
	ST STREET FON, FL 34203	US		
urrent N	lailing Address	: :	New Mailing Addres	ss:
	ST STREET FON, FL 34203	US		
El Number	: 26-2592095	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
3528 NO	S, WALTER S RTH DALE MAE L 33618 US	BRY HWY		
AMPA, F	L 33010 OO			
AMPA, F he above the State		ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both
he above	named entity s e of Florida.	ubmits this statement for the p	purpose of changing its registere	ed office or registered agent, or both
he above the State	e named entity s e of Florida. RE:	ubmits this statement for the place of Signature of Registered Ag		ed office or registered agent, or both Date
ne above the State GNATUI	e named entity s e of Florida. RE: Electroni			
he above the State IGNATUI	e named entity s e of Florida. RE: Electroni	c Signature of Registered Ag Trust Fund Contribution ().	ent	
ne above the State GNATUI	e named entity se of Florida. RE: Electroni mpaign Financing S AND DIRECT P () JOHNSON, SHAI	c Signature of Registered Ag Trust Fund Contribution (). CORS: Delete JNA L HILL AVE CIRCLE	ent	Date
ne above the State GNATUI ection Car FFICER: le: le: lme: ldress:	e named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT P () JOHNSON, SHAM 9935 CHERRY H BRADENTON, FI VP () JOHNSON, CHA	c Signature of Registered Ag Trust Fund Contribution (). FORS: Delete JNA L HILL AVE CIRCLE L 34202 US Delete RLES E HILL AVE CIRCLE	ent ADDITIONS/CHANG Title: Name: Address:	Date SES TO OFFICERS AND DIRECTO

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: SHAUNA JOHNSON P 04/23/2009