

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000061469

FILED
Apr 19, 2010
Secretary of State

Entity Name: KIDZ CONNECTION LEARNING CENTER, INC.

Current Principal Place of Business:

600 FORT SMITH
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

600 FORT SMITH
DELTONA, FL 32738

New Mailing Address:

FEI Number: 36-4640284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORKINS, THOMAS
2531 CANDLEWICK ST.
DELTONA, FL 32738 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: CORKINS, MICHELE
Address: 2531 CANDLEWICK ST.
City-St-Zip: DELTONA, FL 32738

Title: VP
Name: CORKINS, THOMAS
Address: 2531 CANDLEWICK ST.
City-St-Zip: DELTONA, FL 32738

Title: TR
Name: BYRNS, PHYLLIS
Address: 1096 PEAK CIRCLE
City-St-Zip: DELTONA, FL 32738

Title: BM
Name: CORKINS, MEAGAN M
Address: 2531 CANDLEWICK ST
City-St-Zip: DELTONA, FL 32738

Title: BM
Name: CORKINS, JULIE A
Address: 2531 CANDLEWICK ST
City-St-Zip: DELTONA, FL 32738

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: MICHELE CORKINS

PD

04/19/2010

Electronic Signature of Signing Officer or Director

_____ Date