

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000099380

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** EDEN ACADEMY & NURSERY INC

**Current Principal Place of Business:**

2705 ALLEN ROAD  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

**Current Mailing Address:**

2705 ALLEN ROAD  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

**FEI Number:** 45-3819753

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, ELGENETTE B  
2711 ALLEN ROAD  
G9  
TALLAHASSEE, FL 32312 US

**Name and Address of New Registered Agent:**

POPE, ELGENETTE B  
2677 OLD BAINBRIDGE RD  
1131  
TALLAHASSEE, FL 32303 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: ELGENETTE POPE

Electronic Signature of Registered Agent

04/26/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: POPE, ELGENETTE B  
Address: 2677 OLD BAINBRIDGE RD APT 1131  
City-St-Zip: TALLAHASSEE, FL 32303 US

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: ELGENETTE POPE

Electronic Signature of Signing Officer or Director

P

04/26/2012

Date