

**2012**

**CORPORATION REINSTATEMENT**

**FILED**  
**Aug 01, 2012**  
**Secretary of State**

**DOCUMENT# P13000038395**

**Entity Name:** CIRCLE OF LOVE DAYCARE AND LEARNING CENTER CORPORATION

**Current Principal Place of Business:**

1931 COLLEGE CIRCLE NORTH  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

1931 COLLEGE CIRCLE NORTH  
JACKSONVILLE, FL 32209

**New Mailing Address:**

**FEI Number:** 72-1593868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PALMER, DARLENE S  
1931 COLLEGE CIRCLE NORTH  
JACKSONVILLE, FL 32209 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:** DARLENE PALMER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** YETTE, JEFFERSON R  
**Address:** 1407 IMESON STREET  
**City-St-Zip:** JACKSONVILLE, FL 32209

**Title:** D  
**Name:** PALMER, DARLENE S  
**Address:** 1931 COLLEGE CIRCLE NORTH  
**City-St-Zip:** JACKSONVILLE, FL 32209

**Title:** D  
**Name:** PALMER, KENNETH T  
**Address:** 1931 COLLEGE CIRCLE NORTH  
**City-St-Zip:** JACKSONVILLE, FL 32209

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DARLENE PALMER

D

08/01/2012

Electronic Signature of Signing Officer or Director

Date