2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000000472

FILED Apr 08, 2009 Secretary of State

Entity Name: KIDS' STUFF LEARNING & CHILD CARE CENTERS, INC. **New Principal Place of Business: Current Principal Place of Business:** 5650 MEADOWLARK LANE MILTON, FL 32570 US **Current Mailing Address: New Mailing Address:** P.O. BOX 644 MILTON, FL 32572 US FEI Number: 59-3158873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARVER, S. ELLEN CARVER, S. ELLEN 4425 AMBERWOOD CIRCLE 5650 MEADOWLARK LANE PACE, FL 32571 MILTON, FL 32570 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: 04/08/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CARVER, S. ELLEN Name: Name: 5650 MEADOWLARK LANE Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete HOUSTON, KATHY L Name: Name: 7222-A DOGWOOD TERR Address: Address: PENSACOLA, FL 32504 City-St-Zip: City-St-Zip:

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: S. ELLEN CARVER D 04/08/2009