

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000088312 (2)

1. Corporation Name

CHILDREN'S LEARNING CENTERS, INC.



Principal Place of Business

2213 E ATLANTIC BLVD
POMPANO BEACH FL 33062

Mailing Address

2213 E ATLANTIC BLVD
POMPANO BEACH FL 33062

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date incorporated or Qualified
12/28/1993

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0456013

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STEGEMAN, LISA
2213 E ATLANTIC BLVD
POMPANO BEACH FL 33062

10. Name and Address of New Registered Agent

81 Name Kim A Stagner
82 Street Address (P.O. Box Number is Not Acceptable)
101 SE 11 Ave.
83
84 City Pompano Beach FL 85 Zip Code 33060

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Kim A Stagner

(NOTE: Registered Agent signature required when reinstating)

4/30/96
DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	PT			
	STEGEMAN, JOHN E.	3824 RIVERLAND ROAD	FT. LAUDERDALE FL 33312	
	S			
	STAGNER, KIM ANN	9800 NW 71ST STREET	TAMARAC FL 33321	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Kim A Stagner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kim Stagner

4/17/96 (954) 785 3855
Date Daytime Phone #

CR2E034 (12/95)