

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000021354

FILED
Mar 15, 2004
Secretary of State

Entity Name: LEARNSOMETHING, INC.

Current Principal Place of Business:

2457 CARE DRIVE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2457 CARE DRIVE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3236696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH LTD. INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 32301 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: CEOD () Delete
Name: CRUMPACKER, WILLIAM J III
Address: 837 BROOKWOOD DR
City-St-Zip: TALLAHASSEE, FL

Title: S () Delete
Name: BLANTON, THOMAS M
Address: 1215 BUCKINGHAM DR
City-St-Zip: TALLAHASSEE, FL 32308

Title: CD () Delete
Name: MILLER, WILTON R
Address: 3015 WINDSOR WAY
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: MOSLEY, CHARLIE
Address: 9 N PARKWAY SQUARE, 4200 NORTHSIDE PARKWAY
City-St-Zip: ATLANTA, GA 30327

Title: D () Delete
Name: WATTERS, WAYNE
Address: P.O. BOX 351
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: FISH, KENNETH G
Address: P. O. BOX 605
City-St-Zip: EASTPOINT, FL 32328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGARET CARTER

SEC

03/15/2004

Electronic Signature of Signing Officer or Director

_____ Date

STEVE RODEN, CEO
35 GLEN LAKE DRIVE
ATLANTA, GA 30327

JOHN W. HODGE, DIRECTOR
4421 WILD TURKEY WAY
GAINESVILLE, GA 30506