SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 JUL -5 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000079145 (6)**

1. Corporation Name

LOVE 'N' LEARN, INC.

Principal Place of Business	Mailing Address
5200 NW 43RD ST SUITE 503 GAINESVILLE FL 32606	5200 NW 43RD ST SUITE 503 509 GAINESVILLE FL 32606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/27/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 5200 NW 43RD ST	26 5200 NW 43RD ST
Suite, Apt. #, etc. 22 SUITE 509	Suite, Apt. #, etc. 27 SUITE 509
City & State 23 GAINESVILLE, FL	City & State 28 GAINESVILLE, FL
Zip: 24 32653 County: 25 ALACHUA	Zip: 29 32653 County: 30 ALACHUA

4. FEI Number: 59-3274645 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$0.75** Additional Fee Required

6. [illegible] ☐ **$5.00** May Be Added to Fees

8. This corporation has been, for the purposes of tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ROSS, NANCY H 5200 NW 43RD ST SUITE 503 GAINESVILLE FL 32606	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 SUITE 509 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0402 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. Each 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(S) [illegible] DATE

12. OFFICERS AND DIRECTORS	13. Add, Change, Delete
DPST ROSS, NANCY H 5200 NW 43RD ST SUITE 503 GAINESVILLE FL 32606	☒ Change ☐ Addition 5200 NW 43RD. ST SUITE 509
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is accurate, and that such filing does not qualify 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 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, added or deleted) above with an address.

SIGNATURE: Nancy H Ross 6/15/95 904 373-1055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

CR2E034 (3/95)

0000139 CP