## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000044081

**Entity Name:** LEARNIT CORPORATION

FILED Apr 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1703 NW 80TH BLVD 10215 SW 17TH PLACE

GAINESVILLE, FL 326069178 US GAINESVILLE, FL 32607 US

Current Mailing Address: New Mailing Address:

1703 NW 80TH BLVD 10215 SW 17TH PLACE

GAINESVILLE, FL 326069178 US GAINESVILLE, FL 32607 US

FEI Number: 59-3318548 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:

SUPPE, DENNIS R
SUPPE, DENNIS R
10215 SW 17TH PLACE

1/03 NW 80TH BLVD 10215 SW 17TH PLACE
GAINESVILLE, FL 326069178 US GAINESVILLE, FL 32607 US

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: DENNIS R. SUPPE 04/16/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 SUPPE, DENNIS R
 Name:
 SUPPE, DENNIS R

 Address:
 1703 NW 80TH BLVD
 Address:
 10215 SW 17TH PLACE

City-St-Zip: GAINESVILLE, FL 326069178 City-St-Zip: GAINESVILLE, FL 32607

Title: VS () Delete Title: VS (X) Change () Addition
Name: SUPPE, DEBBIE S Name: SUPPE, DEBBIE S

 Address:
 1703 NW 80TH BLVD
 Address:
 10215 SW 17TH PLACE

 City-St-Zip:
 GAINESVILLE, FL 326069718
 City-St-Zip:
 GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBBIE S. SUPPE S 04/16/2007