## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000059960

Entity Name: CHILDREN'S WORKSHOP LEARNING CENTER, INC.

FILED Mar 28, 2008 Secretary of State

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

511 NW ORANGE ST. LAKE CITY, FL 32055

Current Mailing Address: New Mailing Address:

511 NW ORANGE ST. LAKE CITY, FL 32055

FEI Number: 59-3353444 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:

BULLARD, CHARALEE
511 NW ORANGE ST.
LAKE CITY, FL 32055 US

BULLARD MOODY, CHARALEE
511 NW ORANGE ST.
LAKE CITY, FL 32055 US

LAKE CITY, FL 32055 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: CHARALEE BULLARD MOODY 03/28/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition BULLARD, CHARALEE BULLARD MOODY, CHARALEE Name: Name: 1086 FINLEY LITTLE LANE 1086 FINLEY LITTLE LANE Address: Address: City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: LAKE CITY, FL 32024

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

 Name:
 SIRARD, RENÉ
 Name:
 SIRARD, RENÉ

 Address:
 RT 1 BOX 861
 Address:
 9176 NW US HWY 41

 City-St-Zip:
 WHITE SPRINGS, FL 32096
 City-St-Zip:
 WHITE SPRINGS, FL 32096

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: CHARALEE BULLARD MOODY P 03/28/2008