

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000015264

FILED  
Apr 17, 2006  
Secretary of State

Entity Name: ADVANCED LEARNING CENTERS, INC.

## Current Principal Place of Business:

1911 TYRONE BLVD  
SAINT PETERSBURG, FL 33710

## New Principal Place of Business:

1911 TYRONE BLVD  
SAINT PETERSBURG, FL 33710 US

## Current Mailing Address:

1911 TYRONE BLVD  
SAINT PETERSBURG, FL 33710

## New Mailing Address:

1911 TYRONE BLVD  
SAINT PETERSBURG, FL 33710 US

FEI Number: 59-3560631

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

F & L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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: D ( ) Delete  
Name: STERENSIS, JOSEPH  
Address: 8912 LAUREL DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

Title: D ( ) Delete  
Name: STERENSIS, BARBARA  
Address: 8912 LAUREL DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: STERENSIS, JOSEPH B  
Address: 8912 LAUREL DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782 US

Title: D (X) Change ( ) Addition  
Name: STERENSIS, BARBARA  
Address: 8912 LAUREL DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782 US

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: JOSEPH STERENSIS

MR.

04/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date