

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000021354

Entity Name: LEARNSOMETHING, INC.

FILED
Jan 03, 2006
Secretary of State

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:

2457 CARE DRIVE
TALLAHASSEE, FL 32309

FEI Number: 59-3236696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODEN, STEVEN
5500 PIMLICO DRIVE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

RODEN, STEVEN
5500 PIMLICO DRIVE
TALLAHASSEE, FL 32309 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: STEVEN RODEN

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: FUEUING, RICHARD
Address: 120 16 AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: CEO () Delete
Name: RODEN, STEVE M
Address: 5500 DIMLICO DRIVE
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: DS (X) Change () Addition
Name: FUELLING, RICHARD
Address: 120 16 AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: CEO (X) Change () Addition
Name: RODEN, STEVE M
Address: 5500 PIMLICO DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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

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

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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 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: STEVEN RODEN

CEO

01/03/2006

Electronic Signature of Signing Officer or Director

Date