2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758437

FILED Apr 17, 2006 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF PARTNERS IN EDUCATION INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 3010 SOUTHERNSHORE CIR 3010 SOUTH SHORE CIR TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312 US **Current Mailing Address: New Mailing Address:** 16013 CHASTAIN RD. 3010 SOUTHSHORE CIRCLE ODESSA, FL 33556 TALLAHASSEE, FL 32312 FEI Number: 59-2141327 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: HOUCHEN, DONNA C 16013 CHASTAIN RD. ODESSA, FL 33556 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOUCHEN, DONNA Name: Name: 16013 CHASTAIN RD. Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: Title: SD Title: SD (X) Change () Addition () Delete LABIEN, HOLLY Name: LANCASTER, PAT Name: Address: 500 E OCEAN BLVD Address: 1007 WEST MAIN ST. City-St-Zip: STUART, FL 34994 City-St-Zip: INVERNESS, FL 34450 Title: PDTitle: () Delete (X) Change () Addition LANE, JANE LANE, JANE Name: Name: 400 E LAKE MARY BLVD 400 E LAKE MARY BLVD Address: Address: City-St-Zip: SANFORD, FL 327737127 City-St-Zip: SANFORD, FL 327737127 US () Delete Title: VD Title: PD (X) Change () Addition Name: MILLER, JUDI Name: MILLER, JUDI Address: 4131 S. US 1, BLDG 2, #4 Address: 4131 S. US 1, BLDG 2, #4 City-St-Zip: FT. PIERCE, FL 34982 City-St-Zip: FT. PIERCE, FL 34982 US Title: () Delete Title: () Change (X) Addition JACKSON, DORETHA Name: Name: 301 4TH STREET Address: Address: City-St-Zip: City-St-Zip: LARGO, FL 33779 US Title: () Delete Title: () Change (X) Addition LASTOWSKI, PAM Name: Name: Address: Address: 3010 SOUTHSHORE CIRCLE TALLAHASSEE, FL 32312 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA C. HOUCHEN TD 04/17/2006