

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005
Secretary of State

DOCUMENT# 762512

Entity Name: HOMER HOYT ADVANCED STUDIES INSTITUTE, INC.

Current Principal Place of Business:

THE HOYT CENTER #300
760 U.S. HWY. ONE
N. PALM BEACH, FL 33408

New Principal Place of Business:

THE HOYT CENTER
760 U.S. HWY. ONE, SUITE 300
N. PALM BEACH, FL 33408

Current Mailing Address:

THE HOYT CENTER #300
760 U.S. HWY. ONE
N. PALM BEACH, FL 33408

New Mailing Address:

THE HOYT CENTER
760 U.S. HWY. ONE, SUITE 300
N. PALM BEACH, FL 334084424

FEI Number: 52-1263342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELDIN, MAURY
THE HOYT CENTER #300
760 US HWY ONE
NORTH PALM BCH, FL 33408 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FISHER, JEFFREY D
Address: 3310 GOSPORT CT
City-St-Zip: BLOOMINGTON, IN 47401

Title: CPD () Delete
Name: SELDIN, MAURY,
Address: 370 DATE PALM COURT, NE.
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: DVP () Delete
Name: SMITH, HALBERT,
Address: 432 TURKEY CREEK
City-St-Zip: ALACHUA, FL 32615

Title: DTS () Delete
Name: RACSTER, RONALD,
Address: 1441C CLIFF COURT
City-St-Zip: COLUMBUS, OH 43204

Title: D () Delete
Name: VANDELL, KERRY
Address: 3301 TOPPING RD
City-St-Zip: MADISON, WI 53705

Title: AT () Delete
Name: DONOHUE, RON M
Address: 6372 143RD ST
City-St-Zip: PALM BEACH, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Address:
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Title: () Change () Addition
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 Section 119.07(3)(i), 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: RON M. DONOHUE

AT

03/23/2005

Electronic Signature of Signing Officer or Director

Date