

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004292

FILED
Jan 21, 2011
Secretary of State

Entity Name: FUTURE PROBLEM SOLVING PROGRAM INTERNATIONAL, INC.

Current Principal Place of Business:

2015 GRANT PLACE
MELBOURNE, FL 32901

New Principal Place of Business:

2015 GRANT PLACE
MELBOURNE, FL 32901 US

Current Mailing Address:

2015 GRANT PLACE
MELBOURNE, FL 32901

New Mailing Address:

2015 GRANT PLACE
MELBOURNE, FL 32901 US

FEI Number: 42-1234706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, MARIANNE
2015 GRANT PLACE
MELBOURNE, FL 32901 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: P
Name: ROGERS, CYD D
Address: 901 NEAL STREET BLDG 4A
City-St-Zip: AUSTIN, TX 78702 US

Title: PE
Name: BARLOW, MARTHA
Address: 1101 DOVER COURT
City-St-Zip: WAUNAKEE, WI 53597 US

Title: T
Name: TRAGESSE, CAROLYN
Address: 4121 EUREKA RIDGE ROAD
City-St-Zip: OROFINO, ID 83544 US

Title: PP
Name: WOYTHAL, ELIZABETH D
Address: 9184 B 265TH STREET
City-St-Zip: CLEAR LAKE, IA 50428 US

Title: S
Name: NAVARINO, JASON
Address: 333 RIVER STREET APT PH36
City-St-Zip: HOBOKEN, NJ 07030 US

Title: ED
Name: SOLOMON, MARIANNE
Address: 2015 GRANT PLACE
City-St-Zip: MELBOURNE, FL 32901 US

I hereby 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 all other like empowered.

SIGNATURE: MARIANNE SOLOMON

ED

01/21/2011

Electronic Signature of Signing Officer or Director

Date