2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006
Secretary of State

DOCUMENT# N01000002708

Entity Name: TRAINING RESOURCES AND COMPUTER SKILLS, INC.

Current Principal Place of Business:

411 BERWICK AVE
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

10609 N. 56TH ST.
TEMPLE TERRACE, FL 33617

Current Mailing Address:

P.O. BOX 292671
TAMPA, FL 336872671

New Mailing Address:

FEI Number: 65-1099825 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIBSON, PAMELA F
411 BERWICK AVE
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

GIBSON, PAMELA F
10609 N. 56TH ST.
TEMPLE TERRACE, FL 33617 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: _____ 04/05/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GIBSON, PAMELA F
Address: 411 BERWICK AVE
City-St-Zip: TAMPA, FL 33617

Title: VD ( ) Delete
Name: TURPEAU, ANTWAN
Address: 411 BERWICK AVE
City-St-Zip: TAMPA, FL 33617

Title: SD ( ) Delete
Name: GIBSON, REMON
Address: 411 BERWICK AVE
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GIBSON, PAMELA F
Address: P.O. BOX 292671
City-St-Zip: TAMPA, FL 33687

Title: VD (X) Change ( ) Addition
Name: TURPEAU, ANTWAN
Address: P.O. BOX 292671
City-St-Zip: TAMPA, FL 33687

Title: SD (X) Change ( ) Addition
Name: GIBSON, REMON
Address: P.O. BOX 292671
City-St-Zip: TAMPA, FL 33687

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: PAMELA F. GIBSON PD 04/05/2006
Electronic Signature of Signing Officer or Director — Date