

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003061

FILED
Apr 16, 2005
Secretary of State

Entity Name: ALLYN EDUCATIONAL CENTER, INC.

Current Principal Place of Business:

3701 BAYSHORE RD.
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

3701 BAYSHORE RD.
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 03-0434783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TINNEY, DOROTHY A
3701 BAYSHORE RD.
SARASOTA, FL 34234 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: PT () Delete
Name: TINNEY, DOROTHY A
Address: 3701 BAYSHORE RD.
City-St-Zip: SARASOTA, FL 34234

Title: VS () Delete
Name: KILLOREN, THOMAS A
Address: 120 W. STATE ST., STE. 400
City-St-Zip: ROCKFORD, IL 61101

Title: S () Delete
Name: LAVICK-MANDAS, CHERYL
Address: 3701 BAYSHORE RD.
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: BEULIG, ALFRED JR
Address: 5700 N TAMIAMI TR
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: GUERCIO, DONALD G
Address: 463 MEADOW LAKE DR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: WALK, DEBORAH W
Address: 510B SUMMERWOOD CT
City-St-Zip: SARASOTA, FL 34233

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:

Title: D (X) Change () Addition
Name: PAST, RODGER
Address: 3058 HYDE PARK STREET
City-St-Zip: SARASOTA, FL 34239

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: DOROTHY TINNEY

PRES

04/16/2005

Electronic Signature of Signing Officer or Director

_____ Date