

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 11, 2006  
Secretary of State**

DOCUMENT# N04000001509

Entity Name: ENRICHMENT ENTERPRISES, INC.

**Current Principal Place of Business:**

1052 E. SEMORAN BLVD.  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

888 BENTLEY GREEN CIRCLE  
WINTER SPRINGS, FL 32708 US

**New Mailing Address:**

FEI Number: 20-0788635

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEVEN, HOFFMAN  
1052 E. SEMORAN BLVD.  
CASSELBERRY, FL 32707 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 ( ) Delete  
Name: HOFFMAN, STEVEN  
Address: 1052 E. SEMORAN BLVD.  
City-St-Zip: CASSELBERRY, FL 32707

Title: P ( ) Delete  
Name: MORGAN, CYNDI  
Address: 1016 PEBBLE BCH  
City-St-Zip: WTR SPRINGS, FL 32708

Title: D ( ) Delete  
Name: WADE, ELIZABETH  
Address: 1052 SEMORAN BLVD  
City-St-Zip: CASSELBERRY, FL 32707

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: P (X) Change ( ) Addition  
Name: THORNTON, DAVID  
Address: 888 BENTLEY GREEN  
City-St-Zip: WINTER SPRINGS, FL 32708

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 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: STEVEN HOFFMAN

P

01/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date