

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006260

FILED
May 02, 2007
Secretary of State

Entity Name: RIVER CITY EDUCATION SERVICES, INC.

Current Principal Place of Business:

1722 HIDDEN FOREST LN.
JACKSONVILLE, FL 32225

New Principal Place of Business:

3266 SOUTHSIDE BLVD
JACKSONVILLE, FL 32216

Current Mailing Address:

1722 HIDDEN FOREST LN.
JACKSONVILLE, FL 32225

New Mailing Address:

3266 SOUTHSIDE BLVD
JACKSONVILLE, FL 32216

FEI Number: 20-5773949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUYUKSARAC, SELCUK
1722 HIDDEN FOREST LN.
JACKSONVILLE, FL 32225 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: BUYUKSARAC, SELCUK
Address: 1722 HIDDEN FOREST LN.
City-St-Zip: JACKSONVILLE, FL 32225

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: AYDIN, ABDULBASIT
Address: 10010 SKINNER LAKE DR #738
City-St-Zip: JACKSONVILLE, FL 32246

Title: S () Change (X) Addition
Name: BIRDAL, AHMET
Address: 2423 RIDGE WILL DR
City-St-Zip: JACKSONVILLE, FL 32246

Title: M () Change (X) Addition
Name: ROMERO, ANGELINE T
Address: 13167 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32225

Title: M () Change (X) Addition
Name: ANDRUS, DAVE
Address: 2440 CINNAMON SPRINGS TRL
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify 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: SELCUK BUYUKASARAC

P

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date