

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010753

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** SOCIETY OF EMOTIONAL INTELLIGENCE, INC.

**Current Principal Place of Business:**

2202 N WEST SHORE ZBLV  
SUITE 200  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 341738  
TAMPA, FL 33694

**New Mailing Address:**

**FEI Number:** 27-1222777

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

CLEMONS, HANK PHD  
2202 N WEST SHORE BLVD  
200  
TAMPA, FL 33607 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: HANK CLEMONS

01/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PCEO  
Name: CLEMONS, HENRY L  
Address: 16820 IVE LAKE DR  
City-St-Zip: ODESSA, FL 33556

Title: D  
Name: ELAM, DONNA  
Address: 425 S AVALON BLVD 1000-117  
City-St-Zip: ORLANDO, FL 32828

Title: D  
Name: GROSS, MARK  
Address: 219 CONEJO ROAD  
City-St-Zip: SANTA BARBARA, CA 93103

Title: D  
Name: BIRD, RACHEL  
Address: ONE GATEWAY PLAZA MS STOP 99-11-13  
City-St-Zip: LOS ANGELES, CA 90012

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: HANK CLEMONS

PCEO

01/19/2011

Electronic Signature of Signing Officer or Director

Date