2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000425

FILED Jan 22, 2008 Secretary of State

Entity Name: SUNSHINE STATE TEACHERS OF ENGLISH TO SPEAKERS OF OTHER LANGUAGES (TESOL) OF

FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

7220 RUE NOTRE DAME MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

7220 RUE NOTRE DAME MIAMI BEACH, FL 33141

FEI Number: 59-1846978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHUEMANN, CYNTHIA M 7220 RUE NOTRE DAME MIAMI BEACH, FL 33141 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 MORALES-JONES, CARMEN
 Name:
 THOMPSON, ROGER

 Address:
 9865-A PECAN TREE DR.
 Address:
 1912 NW 39TH TERR

 City-St-Zip:
 BOYNTON BEACH, FL 33436
 City-St-Zip:
 GAINESVILLE, FL 32605

Title: 1VP () Delete Title: 1VP (X) Change () Addition Name: THOMPSON, ROGER Name: JACKMAN, ANN Address: 8057 MONSERRAT PL

Address: 1912 NW 39TH TERR Address: 8057 MONSERRAT, PL
City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: WELLINGTON, FL 33414

Title: 2VP () Delete Title: 2VP (X) Change () Addition Name: JACKMAN, ANN Name: HANCOCK, SANDRA

Address: 8057 MONSERRAT, P1 Address: 4005 SW 26TH DRIVE, UNIT D City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: GAINESVILLE, FL 32608

Title: TD () Delete Title: () Change () Addition

 Name:
 SCHUEMANN, CYNTHIA M
 Name:

 Address:
 7220 RUE NOTRE DAME
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 PERKINS, SAM
 Name:
 DAWKINS, NORA

 Address:
 4490 SW 24TH AVE.
 Address:
 21300 N. MIAMI AVE

 City-St-Zip:
 FT. LAUDERDALE, FL 33312
 City-St-Zip:
 MIAMI, FL 33I69

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: CYNTHIA M. SCHUEMANN TD 01/22/2008