2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000115935

TAYLOR, MATTHEW H

TAMPA, FL 33611 US

6228 S DALE MABRY HIGHWAY #8

Name:

Address: City-St-Zip:

FILED May 08, 2007 Secretary of State

Entity Name: TEACHING ADVICE, INC. **Current Principal Place of Business: New Principal Place of Business:** 6334 DOE CIRCLE WEST LAKELAND, FL 33809 **Current Mailing Address: New Mailing Address:** 6334 DOE CIRCLE WEST LAKELAND, FL 33809 US FEI Number: 54-2087900 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: TAYLOR, SHARON E 6334 DOE CIRCLE WEST LAKELAND, FL 33809 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TAYLOR, SHARON E Name: Name: 6334 DOE CIRCLE WEST Address: Address: City-St-Zip: LAKELAND, FL 33809 US City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition TAYLOR, MICHAEL G Name: TAYLOR, MICHAEL G Name: 1518 PLANTATION GROVE CT, #627 6334 DOE CIRCLE WEST Address: Address: PLANT CITY, FL 33566 US LAKELAND, FL 33809 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: SHARON E. TAYLOR 05/08/2007