2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

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Entity Name: FLORIDA ACADEMY FOR MANAGEMENT EXECUTIVES, INC.

Current Principal Place of Business:

P. O. BOX 15106
TALLAHASSEE, FL 323171506

New Principal Place of Business:

3236 WHITNEY DRIVE EAST
TALLAHASSEE, FL 32309

Current Mailing Address:

P. O. BOX 15106
TALLAHASSEE, FL 323171506

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, BARBARA A
3236 WHITNEY DR. EAST
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

COX, BARBARA A
3236 WHITNEY DR. EAST
TALLAHASSEE, FL 32309 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: BARBARA ANN COX 04/10/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CMP ( ) Delete
Name: COX, BARBARA A
Address: 3236 WHITNEY DR. EAST
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD ( ) Delete
Name: GABRIELLE, DONNA
Address: 8440 AUGUSTWOOD LANE
City-St-Zip: TALLAHASSEE, FL 32311

Title: TD ( ) Delete
Name: VIKER, DACQUES
Address: 3502 LIMMERICK
City-St-Zip: TALLALHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COX, CMP, BARBARA A
Address: 3236 WHITNEY DR. EAST
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP (X) Change ( ) Addition
Name: GABRIELLE, DONNA
Address: 8440 AUGUSTWOOD LANE
City-St-Zip: TALLAHASSEE, FL 32311

Title: T (X) Change ( ) Addition
Name: VIKER, DACQUES
Address: 3502 LIMMERICK
City-St-Zip: TALLALHASSEE, FL 32308

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

SIGNATURE: BARBARA ANN COX P 04/10/2006
Electronic Signature of Signing Officer or Director Date