2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034048

Entity Name: ADAPTIVE ASSESSMENT SERVICES INC

FILED Feb 11, 2007 Secretary of State

analy Name: 7,874 TVE 7,88E88WEIVI BERCVISES INC.				
Current Principal Place of Business:			New Principal Place of Business:	
203 JIM BR EAST PAL	RYANT RD ATKA, FL 321:	31		
Current Mailing Address:			New Mailing Address:	
P.O. BOX 2 JACKSON	2969 VILLE, FL 3220	03		
FEI Number: 20-2437514 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
203 JIM BR	ENNETH JR. RYANT RD ATKA, FL 3213	31 US		
The above in the State	named entity s of Florida.	ubmits this statement for the purpose o	f changing it	s registered office or registered agent, or both,
SIGNATUR	RE:			
	Electroni	c Signature of Registered Agent		Date
Election Can	npaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCEO () BRYANT, DAMO 2377 SAN JACIN LEWISVILLE, T	NTO RD	Title: Name: Address: City-St-Zip:	PCEO (X) Change () Addition BRYANT, DAMON U 8770 SUNNY SIDE DRIVE LAPLACE, LA 70068
Title: Name: Address: City-St-Zip:	EVPC () JAMES, KENNE 203 JIM BRYAN E PALATKA, FL	T RD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SVSF () YANCEY, MARC 3948 ADAMSVIL ATLANTA, GA 3	LE DR, SW	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CTO () BETHEA, LEON, 4427 DOLPHIN TAMPA, FL 336	DR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SVET () THORNTON, WI 2517 MARINA B GRAND PRAIRII	LVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SVRD () DAVIS, LARRY 1700 CIRCE LK ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition

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: KENNETH JAMES JR EVP 02/11/2007