

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000034048

**Entity Name:** ADAPTIVE ASSESSMENT SERVICES INC.**Current Principal Place of Business:**203 JIM BRYANT RD  
EAST PALATKA, FL 32131**Current Mailing Address:**P.O. BOX 2969  
JACKSONVILLE, FL 32203**FEI Number:** 20-2437514**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES, KENNETH JR.  
203 JIM BRYANT RD  
EAST PALATKA, FL 32131 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PCEO
Name	BRYANT, DAMON U
Address	2377 SAN JACINTO DRIVE
City-State-Zip:	LEWISVILLE TX 75067

Title	EVPC
Name	JAMES, KENNETH JR
Address	203 JIM BRYANT RD
City-State-Zip:	E PALATKA FL 32136

Title	CTO
Name	BETHEA, LEONARD M
Address	4427 DOLPHIN DR
City-State-Zip:	TAMPA FL 33617

Title	SVRD
Name	DAVIS, LARRY
Address	1700 CIRCE LK CT
City-State-Zip:	ORLANDO FL 32826

Title	DIRECTOR OF TECHNOLOGY
Name	BETHEA, JON
Address	5467 LEIGHTON LANE
City-State-Zip:	OVIEDO FL 32765

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

**SIGNATURE:** KENNETH JAMES JR

EVP

04/01/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date