

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716707

FILED
Apr 20, 2010
Secretary of State

Entity Name: EDUCATIONAL OPPORTUNITIES, INC.

Current Principal Place of Business:

5725 IMPERIAL LAKES BLVD.
MULBERRY, FL 33860

New Principal Place of Business:

Current Mailing Address:

% ROBERT S. BOLT, ESQ.
601 BAYSHORE BLVD STE 700
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-1269611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLT, ROBERT S
601 BAYSHORE BOULEVARD
SUITE 700
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: WHITE, WOODIE W
Address: 3996 MADISON MAIN NW
City-St-Zip: KENNESAW, GA 30144

Title: PED
Name: DUNCAN, ROBERT J REV
Address: 5725 IMPERIAL LAKES BOULEVARD
City-St-Zip: MULBERRY, FL 33860 US

Title: D
Name: GROVE, WILLIAM B BSHP
Address: 109 MCDAVID LANE
City-St-Zip: CHARLESTON, WV 25311 US

Title: D
Name: KNOX, JAMES L BSHP
Address: 6909 MARTIN LUTHER KING, JR. ST SO #444
City-St-Zip: ST. PETERSBURG, FL 33705 US

Title: D
Name: MORGAN, ROBERT C BSHP
Address: 1295 MALIBU PLACE
City-St-Zip: BIRMINGHAM, AL 35216 US

Title: DST
Name: FANNIN, ROBERT E BSHP
Address: 2065 ATHENIA WAY
City-St-Zip: LAKELAND, FL 33813 US

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

SIGNATURE: REV. DR. ROBERT J. DUNCAN

P

04/20/2010

Electronic Signature of Signing Officer or Director

Date