2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 746113

Entity Name: FLORIDA EDUCATIONAL NEGOTIATORS, INC.

Current Principal Place of Business:

203 S. MONROE ST.
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

203 S. MONROE ST.
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-1943567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHMIDT, MAX
203 S. MONROE ST.
TALLAHASSEE, FL 32301 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 ( ) Delete
Name: SCHMIDT, MAX
Address: 203 S. MONROE ST.
City-St-Zip: TALLAHASSEE, FL 32301

Title: P ( ) Delete
Name: BUTLER, CHUCK
Address: 817 BILL BECK BLVD
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: LUDY, VAN
Address: 3340 FOREST HILL BOULEVARD
City-St-Zip: WEST PALM BEACH, FL 33406

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

SIGNATURE: DR. MAX L. SCHMIDT DIR 04/13/2009

Electronic Signature of Signing Officer or Director — Date