

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765984

FILED
Feb 10, 2010
Secretary of State

Entity Name: DIRECT ACTION AND RESEARCH TRAINING CENTER, INC.

Current Principal Place of Business:

C/O JOHN A. CALKINS
314 N.E. 26TH TERRACE
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

C/O JOHN A. CALKINS
POST OFFICE BOX 370791
MIAMI, FL 33137791 US

New Mailing Address:

FEI Number: 59-2244743 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CALKINS, JOHN A.
314 N.E. 26TH TERRACE
MIAMI, FL 33137 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: CLEAR, HUGH
Address: 7116 SW 110 AVE
City-St-Zip: MIAMI, FL 33173

Title: SD
Name: HOGNER, ROBERT DR
Address: FIU BA307
City-St-Zip: MIAMI, FL 33199

Title: PD
Name: HANSON, BRUCE
Address: 78 MALLARD WAY
City-St-Zip: WALTHAM, MA 02452

Title: TD
Name: PROCTOR, JAMES REV
Address: 11423 BRIDGES RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: KEE, JEFFREY P
Address: 955 OAK ST
City-St-Zip: COLUMBUS, OH 43205

Title: VPD
Name: ROQUE, ALEJANDRO
Address: 6044 SW 19TH ST
City-St-Zip: HOLLYWOOD, FL 330232928

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: JOHN A CALKINS

RA

02/10/2010

Electronic Signature of Signing Officer or Director

Date