2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008
Secretary of State

DOCUMENT# 768834

Entity Name: THE RIVER EDUCATIONAL MEDIA, INC.

Current Principal Place of Business:

2361 CORTEZ ROAD
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

WILLIAM MCBRIDE LAW GROUP, P.A.
135 W. CENTRAL BLVD., SUITE 1100
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-2445925 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAM MCBRIDE LAW GROUP, P.A.
135 W. CENTRAL BLVD.
SUITE 1100
ORLANDO, FL 32801 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: DP ( ) Delete
Name: EPPERSON, NANCY A
Address: 3780 WILL SCARLET ROAD
City-St-Zip: WINSTON-SALEM, NC 27104

Title: D ( ) Delete
Name: EPPERSON, STUART W JR.
Address: 3780 WILL SCARLET ROAD
City-St-Zip: WINSTON-SALEM, NC 27104

Title: D ( ) Delete
Name: MCBRIDE, KRISTINE E
Address: 5277 ISLEWORTH C.C. DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete
Name: DE NEUI, KAREN JUNE
Address: 1546 BRETTON WOOD WAY
City-St-Zip: LITTLETON, CO 80129

Title: D ( ) Delete
Name: FONVILLE, JOHN
Address: 1417 PONTE VEDRA BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: MCBRIDE, KRISTINE E
Address: 11135 BRIDGE HOUSE ROAD
City-St-Zip: WINDERMERE, FL 34786

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

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

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: NANCY A. EPPERSON DP 04/15/2008

Electronic Signature of Signing Officer or Director — Date