

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007141

FILED
May 01, 2006
Secretary of State

Entity Name: NNOVATION LEARNING GROUP, INC.

Current Principal Place of Business:

711 SOUTH CARSON STREET
STE 4
CARSON CITY, NV 89701

New Principal Place of Business:

607 CELEBRATION AVE
CELEBRATION, FL 34747

Current Mailing Address:

607 CELEBRATION AVENUE
CELEBRATION, FL 34747 US

New Mailing Address:

FEI Number: 88-0442705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEILSON, ALTHA M
607 CELEBRATION AVENUE
CELEBRATION, FL 34747 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: NEILSON, ALTHA M DR.
Address: 8, 1922 - 9TH AVE SE
City-St-Zip: CALGARY, AB T2G0V2 CA

Title: PSD () Delete
Name: NEILSON, KENT R MR.
Address: 8, 1922 - 9TH AVE SE
City-St-Zip: CALGARY, AB T2G0V2 CA

Title: VSD () Delete
Name: LOISELLE, TAMARA L MS.
Address: 8, 1922 - 9TH AVE SE
City-St-Zip: CALGARY, AB T2G0V2 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: NEILSON, ALTHA M DR.
Address: 607 CELEBRATION AVE
City-St-Zip: CELEBRATION, FL 34747 US

Title: PSD (X) Change () Addition
Name: NEILSON, KENT R MR.
Address: 607 CELEBRATION AVE
City-St-Zip: CELEBRATION, FL 34747 US

Title: VSD (X) Change () Addition
Name: LOISELLE, TAMARA L MS.
Address: 607 CELEBRATION AVE
City-St-Zip: CELEBRATION, FL 34747 US

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENT NEILSON

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date