

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005664

Entity Name: EDUCATIONAL PARTNERS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

333 W FIRST ST SUITE 170
DAYTON, OH 45402

New Principal Place of Business:

333 W FIRST ST
SUITE 170
DAYTON, OH 45402

Current Mailing Address:

4700 MILLENIA BLVD
SUITE 295
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 31-1662885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, TERRACE L
4700 MILLENIA BLVD.,
SUITE 295
ORLANDO, FL 32839 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: TUCKER, SANDRA A
Address: 333 W FIRST ST SUITE 170
City-St-Zip: DAYTON, OH 45402

Title: VSD () Delete
Name: THOMAS, CARMON D
Address: 333 W FIRST ST SUITE 170
City-St-Zip: DAYTON, OH 45402

Title: T () Delete
Name: TUCKER, SANDRA A
Address: 333 W FIRST ST SUITE 170
City-St-Zip: DAYTON, OH 45402

Title: D () Delete
Name: MOORE, ALICIA F
Address: 1510-5 LAKE POINTE WAY
City-St-Zip: CENTERVILLE, OH

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

SIGNATURE: CARMON D. THOMAS

VSD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date