

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006503

FILED
May 07, 2007
Secretary of State

Entity Name: NOMAD ACADEMIC & TUTORING CENTER, INC.

Current Principal Place of Business:

1307 33RD ST E
PALMETTO, FL 34221

New Principal Place of Business:

2017 CANAL DR N-27
BRADENTON, FL 34207

Current Mailing Address:

1307 33RD ST E
PALMETTO, FL 34221

New Mailing Address:

7344 MORTON ST
MERRILLVILLE, IN 46410

FEI Number: 52-2031625 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROPER, MORRELL
1307 33RD ST E
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

ROPER, MORRELL
2017 CANAL DR N-27
BRADENTON, FL 34207 US

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: _____

05/07/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROPER, MORRELL
Address: 1307 33RD ST E
City-St-Zip: PALMETTO, FL 34221

Title: VT () Delete
Name: ROPER, LEO
Address: 7344 MORTON ST
City-St-Zip: MERRILLVILLE, IN 46410

Title: S () Delete
Name: MITCHELL, PATRICIA
Address: 2313 6TH AVE DRIVE E.
City-St-Zip: BRADENTON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROPER, MORRELL
Address: 2017 CANAL DR N-27
City-St-Zip: BRADENTON, FL 34207

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: LEO J ROPER

VT

05/07/2007

Electronic Signature of Signing Officer or Director

Date