2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# F04000006356

Entity Name: SENIOR SUMMER SCHOOL, INC.

Current Principal Place of Business:

150 E. GILMAN STREET
MADISON, WI 53703

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 188
MADISON, WI 537010188

New Mailing Address:

FEI Number: 39-1766332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWACK, DAVID
4400 W. SAMPLE RD, SUITE 142
COCONUT CREEK, FL 33073 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: P ( ) Delete
Name: WIRSHBA, SETH
Address: 12854 HYLAND CIRCLE
City-St-Zip: BOCA RATON, FL 33428

Title: T ( ) Delete
Name: WIRSHBA, KAREN
Address: 12854 HYLAND CIRCLE
City-St-Zip: BOCA RATON, FL 33428

Title: VS ( ) Delete
Name: LEVY, LISA
Address: 202 FARWELL DRIVE
City-St-Zip: MADISON, WI 53704

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: P ( ) Change (X) Addition
Name: LEVY, WILLIAM
Address: 202 FARWELL DRIVE
City-St-Zip: MADISON, WI 53704

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: WILLIAM LEVY P 04/13/2006

Electronic Signature of Signing Officer or Director Date