


FILED
Apr 23, 2007 8:00 am
Secretary of State

400100 -

DOCUMENT # F06000006540

1. Entity Name
ADVANCED ACADEMICS, INC.



Principal Place of Business
100 E. CALIFORNIA, STE. 200
OKLAHOMA CITY, OK 73104

Mailing Address
100 E. CALIFORNIA, STE. 200
OKLAHOMA CITY, OK 73104

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

ZipCountry

3. Mailing Address

Suite, Apt. #, etc.

City & State

ZipCountry

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
CityFLZip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS
TITLENAMESTREET ADDRESSCITY-ST-ZIP
P
ELLIOTT, JEFFREY
100 E. CALIFORNIA, STE. 200
OKLAHOMA CITY, OK 73104
ST
JORDAN, DALE
100 E. CALIFORNIA, STE. 200
OKLAHOMA CITY, OK 73104
D
FRICK, JOHN B.
425 NW 17
OKLAHOMA CITY, OK 73103
D
CAMERON, WILLIAM E.
7314 LANCET LANE
OKLAHOMA CITY, OK 73120
D
HAGER, JIM
2278 KEEGO HARBOR ST.
HENDERSON, NV 89052
D
JONES, DAVID A. JR.
101 S. FIFTH ST.
LOUISVILLE, KY 40202

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLENAMESTREET ADDRESSCITY-ST-ZIP
P
Jeffrey A. Elliott
100 E California, Ste 200
Oklahoma City, OK 73104
ST
Dale F. Jordan, Jr.
100 E California, Ste. 200
Oklahoma City, OK 73104

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dale F. Jordan, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #