

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000001418

**FILED**  
**Feb 03, 2011**  
**Secretary of State**

**Entity Name:** EFFECTIVENESS ENHANCEMENT, INC.

**Current Principal Place of Business:**

36 PAULINE ROAD  
LOUISVILLE, KY 40206

**New Principal Place of Business:**

**Current Mailing Address:**

36 PAULINE ROAD  
LOUISVILLE, KY 40206

**New Mailing Address:**

**FEI Number:** 52-1951863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EVERS, AMY  
10961 BURNY MILL RD #1138  
JACKSONVILLE, FL 32256 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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: MC ALPINE, ROBERT  
Address: 36 PAULINE ROAD  
City-St-Zip: LOUISVILLE, KY 40206

Title: VCV  
Name: MC ALPINE, ROBERT  
Address: 36 PAULINE ROAD  
City-St-Zip: LOUISVILLE, KY 40206

Title: ST  
Name: MC ALPINE, ROBERT  
Address: 36 PAULINE ROAD  
City-St-Zip: LOUISVILLE, KY 40206

I hereby 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 all other like empowered.

SIGNATURE: ROBERT MCALPINE

VCVP

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date