

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10958

FILED  
Apr 01, 2009  
Secretary of State

**Entity Name:** CONTINUING EDUCATION PROGRAMS, INC.

**Current Principal Place of Business:**

1828 SE FIRST AVE  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

1828 SE FIRST AVE  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

**FEI Number:** 59-2045681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOYA, FRANK M.D.  
1828 SE FIRST AVENUE  
FORT LAUDERDALE, FL 33316 US

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

MOYA, FRANK M.D.  
1828 SE FIRST AVENUE  
FORT LAUDERDALE, FL 33316 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: FRANK MOYA

04/01/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MOYA, FRANK  
Address: 1828 SE FIRST AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: DS ( ) Delete  
Name: MCNULTY, JOAN  
Address: 1828 SE FIRST AVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MOYA, FRANK M.D.  
Address: 1828 SE FIRST AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33316

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: JOAN MCNULTY

S

04/01/2009

Electronic Signature of Signing Officer or Director

Date