

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005821

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** AMERICAN SOCIETY OF HUMANISTIC EDUCATION, INC.

**Current Principal Place of Business:**

160 W. TROTTERS DRIVE  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

160 W. TROTTERS DRIVE  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 59-2031425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VON HILSHEIMER, GEORGE  
160 W. TROTTERS DRIVE  
MAITLAND, FL 32751 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: P  
Name: WARNER, JONNIE M  
Address: 160 W TROTTERS DR  
City-St-Zip: MAITLAND, FL 32751

Title: V  
Name: VONHILSHEIMER, GEORGE  
Address: 160 W. TROTTERS DRIVE  
City-St-Zip: MAITLAND, FL 32751

Title: ST  
Name: GILL, GREG  
Address: 740 LINCOLN RD  
City-St-Zip: DELAND, FL 32724

Title: D  
Name: WARNER, DENNIS  
Address: 1616 ORANOLE RD  
City-St-Zip: MAITLAND, FL 32751

Title: D  
Name: SCOVELL, WILLIAM  
Address: 325 MICHIGAN AVENUE  
City-St-Zip: DELAND, FL 32724

Title: D  
Name: WARNER, DEREK  
Address: 2006 LOCHBERRY RD  
City-St-Zip: WINTER PARK, FL 32789

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JONNIE MAE WARNER

PRES

04/29/2010

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

\_\_\_\_\_  
Date