

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M23645

Entity Name: THE UPLEDGER INSTITUTE, INC.

FILED  
May 22, 2008  
Secretary of State

## Current Principal Place of Business:

11211 PROSPERITY FARMS RD.  
SUITE D325  
PALM BCH GARDENS, FL 33410

## New Principal Place of Business:

## Current Mailing Address:

11211 PROSPERITY FARMS RD.  
SUITE D325  
PALM BCH GARDENS, FL 33410

## New Mailing Address:

FEI Number: 59-2609606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORMAN, KENNETH A  
2400 SE FEDERAL HWY  
4TH FLOOR  
STUART, FL 34994 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: DP ( ) Delete  
Name: UPLEDGER, JOHN E  
Address: 8850 150TH CT N  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: DVT ( ) Delete  
Name: SABLE, WILLIAM A  
Address: 920 SE ATLANTIC DR  
City-St-Zip: LANTANA, FL 33462 US

Title: D (X) Delete  
Name: KINNEY, DOUG  
Address: 12476 RIDGE ROAD  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: D ( ) Delete  
Name: CUNNINGHAM, WILLIAM  
Address: 533 GREENWAY DRIVE  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: DS ( ) Delete  
Name: UPLEDGER, LISA  
Address: 8850 150TH COURT N.  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

## 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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN E. UPLEDGER

P

05/22/2008

Electronic Signature of Signing Officer or Director

Date