

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 16, 2007
Secretary of State

DOCUMENT# N00000005351

Entity Name: STUDY ZONE OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**11073 MANELE COURT
BOYNTON BEACH, FL 33437**New Principal Place of Business:****Current Mailing Address:**11073 MANELE COURT
BOYNTON BEACH, FL 33437**New Mailing Address:****FEI Number:** 65-1036173**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DANZ, MURRAY
11073 MANELE COURT
BOYNTON BEACH, FL 33437 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:** PD () Delete
Name: DANZ, MURRAY
Address: 11073 MANELE COURT
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** SD () Delete
Name: DANZ, IRENE
Address: 11073 MANELE COURT
City-St-Zip: BOYNTON BEACH, FL 33437**Title:** TD () Delete
Name: HIRSCHMAN, FRED
Address: 13209 ALHAMBRA LAKE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33446**Title:** () Delete
Name:
Address:
City-St-Zip:**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:** D () Change (X) Addition
Name: HOLTZ, SUSAN F DR.
Address: 16258 ANDALUCIA LANE
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IRENE DANZ

SD

02/16/2007

Electronic Signature of Signing Officer or Director

Date