2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2006
Secretary of State

DOCUMENT# N00000005418

Entity Name: DRE'S PLAYHOUSE EXCEPTIONAL ACADEMY, INC.

Current Principal Place of Business:

1201 MARTIN L. KING DR
PERRY, FL 32328

New Principal Place of Business:

800 W. ASH STREET
CLASSROOM #47
PERRY, FL 32327

Current Mailing Address:

P.O. BOX 1313
PERRY, FL 32348

New Mailing Address:

FEI Number: 02-0597206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JONES, TONJA FEWS-
285 EL CAMINO DRIVE
PERRY, FL 32347 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: JONES, TONJA FEWS-
Address: 285 EL CAMINO DRIVE
City-St-Zip: PERRY, FL 32347

Title: VPD ( ) Delete
Name: JONES, AUNDRE J
Address: 4321 PINEBARK AVENUE
City-St-Zip: ORLANDO, FL 32811

Title: COB ( ) Delete
Name: BLOUNT, LAWRENCE E
Address: 285 EL CAMINO DRIVE
City-St-Zip: PERRY, FL 32347

Title: TD ( ) Delete
Name: JONES, AUNTRE J
Address: 285 EL CAMINO DRIVE
City-St-Zip: PERRY, FL 32347

Title: SO ( ) Delete
Name: WALKER, TREVA
Address: 109 BELAIR STREET
City-St-Zip: PERRY, FL 32348

Title: D ( ) Delete
Name: JONES, AUNDRE J JR
Address: 285 EL CAMINO DRIVE
City-St-Zip: PERRY, FL 32347

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:

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

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: TONJA FEWS-JONES PD 06/26/2006

Electronic Signature of Signing Officer or Director — Date