

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006492

FILED
Jan 17, 2007
Secretary of State

Entity Name: CENTRAL FLORIDA HIGHER EDUCATIONAL ALLIANCE, INC.

Current Principal Place of Business:

4000 MILLENIA BLVD
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 160518
ALTAMONTE SPRINGS, FL 327160518

New Mailing Address:

FEI Number: 59-3675603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMOREAUX, WENDY
111 LAKE HOLLINGSWORTH DR
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

LAMOREAUX, WENDY A
1650 SAND LAKE RD
SUITE 390
ORLANDO, FL 32809 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: WENDY ANN LAMOREAUX

01/17/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAMOREAUX, WENDY
Address: 111 LAKE HOLLINGSWORTH DR
City-St-Zip: LAKELAND, FL 33801

Title: V () Delete
Name: MATTISON, JENNIFER
Address: 2301 MAITLAND CENTER PKWY., #115
City-St-Zip: MAITLAND, FL 32751

Title: S () Delete
Name: ARGEROS, ALICE
Address: 1000 HOLT AVE 2722
City-St-Zip: WINTER PARK, FL 32789

Title: V () Delete
Name: SEMLER, CHRIS
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: T () Delete
Name: ROBINSON, KIM
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: CROOMS, PHYLLIS
Address: 1020 N ORLANDO AVE., SUITE 2
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAMOREAUX, WENDY
Address: 1650 SAND LAKE RD, SUITE 390
City-St-Zip: ORLANDO, FL 32809

Title: V (X) Change () Addition
Name: ARGEROS, ALICE
Address: 1000 HOLT AVE- 2722
City-St-Zip: WINTER PARK, FL 32789

Title: S (X) Change () Addition
Name: BUCHAN, KAREN
Address: 6750 FORUM DR, SUITE 300
City-St-Zip: ORLANDO, FL 32821

Title: V (X) Change () Addition
Name: STRAUBINGER, DEBORAH
Address: 2180 WEST SR 434, SUITE 5100
City-St-Zip: LONGWOOD, FL 32779

Title: T (X) Change () Addition
Name: SEMLER, CHRISTINE
Address: 4000 MILLENIA BLVD
City-St-Zip: ORLANDO, FL 32839

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: WENDY ANN LAMOREAUX

PRES

01/17/2007

Electronic Signature of Signing Officer or Director

Date