

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008018

FILED
Mar 22, 2006
Secretary of State

Entity Name: THE ACHIEVEMENTS GROUP, INC.

Current Principal Place of Business:

4344 PINNACLE ST
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

2600 BOBCAT VILLAGE CENTER ROAD
NORTH PORT, FL 34288

Current Mailing Address:

2600 BOBCAT VILLAGE CENTER ROAD
NORTH PORT, FL 34288

New Mailing Address:

FEI Number: 65-1059489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREGOIRE, TINARAE
4344 PINNACLE ST
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

GREGOIRE, TINARAE
2740 BOBCAT VILLAGE CENTER ROAD
SUITE 300B
NORTH PORT, FL 34288 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: TINARAE GREGOIRE

03/22/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FEO, DAVID
Address: 3220 ALESIO AVE
City-St-Zip: NORTH PORT, FL 34286

Title: VP () Delete
Name: HOULT, LOIS
Address: 2317 CHATLIN
City-St-Zip: HOLIDAY, FL 34291

Title: ST () Delete
Name: PROVANZANO, ANGELA
Address: 5538 SAN LUIS TERRACE
City-St-Zip: NORTH PORT, FL 34286

Title: D () Delete
Name: TAUBE, JEFFREY
Address: 18505 PAULSON DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D () Delete
Name: HOMOKY, JOSEPH
Address: 428 FIELD STONE DRIVE
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: PATANE, AGATHA
Address: P.O. BOX 494253
City-St-Zip: PORT CHARLOTTE, FL 339490253

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
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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: DAVID FEO

PRES

03/22/2006

Electronic Signature of Signing Officer or Director

Date