

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000543

FILED
Apr 30, 2004
Secretary of State**Entity Name:** AMERICAN TEACHER ALLIANCE, INC.**Current Principal Place of Business:**2457 A SOUTH HIAWASSEE RD #161
ORLANDO, FL 328359998**New Principal Place of Business:**7800 W. SANDLAKE RD
SUITE 207
ORLANDO, FL 328195198**Current Mailing Address:**2457 A SOUTH HIAWASSEE RD #161
ORLANDO, FL 328359998**New Mailing Address:**7800 W. SANDLAKE RD
SUITE 207
ORLANDO, FL 328195198**FEI Number:** 59-3701668**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MAYFIELD, J ROBERT
2457 A SOUTH HIAWASSEE RD #161
ORLANDO, FL 328359998**Name and Address of New Registered Agent:**MAYFIELD, J ROBERT
7800 W. SANDLAKE RD
SUITE 207
ORLANDO, FL 328195198

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: _____

04/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KENDRICK, WILLIAM E
Address: 145 MEETING HOUSE RD
City-St-Zip: FAYETTEVILLE, GA 30215

Title: D () Delete
Name: SMITH, LAURA M
Address: 210 GLENDALE AVE
City-St-Zip: DECATUR, GA 30030

Title: D () Delete
Name: MAYFIELD, ROBERT C
Address: 607 D SOUTH OREGON AVE
City-St-Zip: TAMPA, FL 33606

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: HARVEY, IRA W
Address: 2213 HUNTERS COVE
City-St-Zip: BIRMINGHAM, AL 35216 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM E. KENDRICK

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date