


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90048 025 ****61.25

DOCUMENT # N01000007992 1. Entity Name GUARANTEED INVOLVEMENT FOR TEACHERS & STUDENTS, INC.	
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Principal Place of Business 1220 E. INDUSTRIAL DRIVE UNIT 11 ORANGE CITY FL 32763	Mailing Address P.O. BOX 741392 ORANGE CITY FL 32774-1392
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/06)

City & State	City & State	4. FEI Number 59-3756014	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DEVANE, JOELLE R 1220 E. INDUSTRIAL DRIVE UNIT 11 ORANGE CITY FL 32763	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS													
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">D BRADLEY, REGINA 448 E. UNIVERSITY AVENUE ORANGE CITY FL 32763</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D DEVANE, BILL SR. 459 E. UNIVERSITY AVENUE ORANGE CITY FL 32763</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D DEVANE, JOELLE R 721 E FRENCH AVE ORANGE CITY FL 32763</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D DEVANE, KAREN L 459 E. UNIVERSITY AVENUE ORANGE CITY FL 32763</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>DIR RANDAZZO, SHELLEY 226 COUNCIL BLUFFS DRIVE DELTONA FL 32725</td> <td style="text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>D MECKLEY, JENNIFER 3106 CAN BY DR DELTONA FL 32738</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table>	D BRADLEY, REGINA 448 E. UNIVERSITY AVENUE ORANGE CITY FL 32763	<input type="checkbox"/> Delete	D DEVANE, BILL SR. 459 E. UNIVERSITY AVENUE ORANGE CITY FL 32763	<input type="checkbox"/> Delete	D DEVANE, JOELLE R 721 E FRENCH AVE ORANGE CITY FL 32763	<input type="checkbox"/> Delete	D DEVANE, KAREN L 459 E. UNIVERSITY AVENUE ORANGE CITY FL 32763	<input type="checkbox"/> Delete	DIR RANDAZZO, SHELLEY 226 COUNCIL BLUFFS DRIVE DELTONA FL 32725	<input checked="" type="checkbox"/> Delete	D MECKLEY, JENNIFER 3106 CAN BY DR DELTONA FL 32738	<input type="checkbox"/> Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10													
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen DeVane **KAREN DEVANE** 3-30-07 (386) 048465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day Phone #