2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008591

FILED Feb 15, 2007 Secretary of State

Entity Name: INDIGENOUS PEOPLE'S TECHNOLOGY AND EDUCATION CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 10575 SW 147TH CIR. DUNNELLON, FL 34432 **Current Mailing Address: New Mailing Address:** 10575 SW 147TH CIR DUNNELLON, FL 34432 FEI Number: 65-1157844 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAINT, JESSE 10575 SW 147TH CIR. DUNNELLON, FL 34432 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SAINT, STEPHEN Name: Name: 3708 SE 4TH ST. Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: DEVP () Delete Title: (X) Change () Addition WALRATH, EUGENE Name: WALRATH, EUGENE Name: Address: 8653--G SW 96TH STREET Address: 8653--G SW 96TH STREET City-St-Zip: OCALA, FL 34481 City-St-Zip: OCALA, FL 34481 Title: VPPD () Delete Title: (X) Change () Addition SCHOENIG, DARRELL SOLOMON, TIMOTHY Name: Name: 6166 RED RIDGE TRAIL 4764 BREEZY PINES BLVD Address: Address: City-St-Zip: BELLVUE, CO 80512 City-St-Zip: SARASOTA, FL 34232 Title: SD () Delete Title: () Change () Addition Name: PETERS, DOUGLAS C Name: Address: 1270 WINDMILL AVE. Address: City-St-Zip: COLORADO SPRINGS, CO 80907 City-St-Zip: Title: () Delete Title: () Change () Addition SAINT, JESSE Name: Name: 13151 SW 100TH LANE Address: Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: Title: () Delete Title: () Change (X) Addition SMITH. GREG Name: Name: Address: Address: 11491 E RAMBLING DRIVE WELLINGTON, FL 33414 City-St-Zip: 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: JESSE SAINT T 02/15/2007