2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000922

FILED Mar 18, 2008 Secretary of State

Entity Name: I CAN COMMUNITY EDUCATION COALITION, INC. **Current Principal Place of Business: New Principal Place of Business:** 5118 N. 56TH ST., STE 130 5118 N. 56TH ST., STE 123 TAMPA, FL 33610 TAMPA, FL 3361Ó **Current Mailing Address: New Mailing Address:** PO BOX 11484 TAMPA, FL 336801484 FEI Number: 30-0019284 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: TATE-MARTIN, MICHELLE 7803 LEMONWOOD COURT TEMPLE TERRACE, FL 33637 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: (X) Change () Addition () Delete WALTON, KATHERINE NORIEGA, MICHELE Name: Name: Address: 211 W. FLORIBRASKA AVE. Address: 9109 SHELDON WEST DR City-St-Zip: TAMPA, FL 33603 City-St-Zip: TAMPA, FL 33626 Title: () Delete Title: () Change () Addition HAYNES-BOTCHWAY, PATRICIA Name: Name: Address: 11205 KILLEARN COURT Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: Title: () Delete Title: () Change () Addition LOPEZ, MONICA P. Name: Name: 4207 S. DALE MABRY HWY, #11209 Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WIGGINS, ERVIN Name: Address: 11728 N 14TH ST APT 14 Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHELLE TATE-MARTIN DIR 03/18/2008