

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000951

FILED
Apr 24, 2006
Secretary of State

Entity Name: EDUCATION IN THE NEW MILLENNIUM, INC.

Current Principal Place of Business:

9310 BAY VISTA ESTATES BLVD.
ORLANDO, FL 32836 US

New Principal Place of Business:

P.O. BOX 692214
ORLANDO, FL 32869 US

Current Mailing Address:

9310 BAY VISTA ESTATES BLVD.
ORLANDO, FL 32836 US

New Mailing Address:

P.O. BOX 692214
ORLANDO, FL 32869 US

FEI Number: 41-2026955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SWING, MARCE DR.
9310 BAY VISTA ESTATES BLVD.
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

SWING, MARCE DR.
21 IVANHOE
KISSIMMEE, FL 34746 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: MARCE SWING

04/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARCE, SWING DR.
Address: BAY VISTA ESTATE BLVD.
City-St-Zip: ORLANDO, FL 32836 US

Title: VD () Delete
Name: WREN, ABER
Address: 2016 WOODY DR.
City-St-Zip: WINDERMERE, FL 346676 US

Title: SD () Delete
Name: MARY, MYERS
Address: 16 TOMAKA DR.
City-St-Zip: OVEIDO,, FL 32765 US

Title: D () Delete
Name: SHANK, TIM
Address: 2409B RUTLAND AVENUE
City-St-Zip: REDONDO BEACH, CA 90278

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARCE, SWING
Address: P.O. BOX 692214
City-St-Zip: ORLANDO, FL 32869 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2VD (X) Change () Addition
Name: SHANK, TIM
Address: 2409B RUTLAND AVENUE
City-St-Zip: REDONDO BEACH, CA 90278

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: MARCE SWING

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date