2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# N02000002413

Entity Name: LAKE SUMTER SOCIETY FOR HUMAN RESOURCE MANAGEMENT, INC.

Current Principal Place of Business:

851 N. DONNELLY ST.
SUITE 6
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

851 N. DONNELLY ST.
SUITE 6
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: 74-3039698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, JR., ARTHUR R ESQ.
851 N. DONNELLY ST.
SUITE 6
MT. DORA, FL 32757 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: PINEDA, BONNIE
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: PP ( ) Delete
Name: HEBROCK, BERNI
Address: PO BOX 49003
City-St-Zip: LEESBURG, FL 347490003

Title: PE ( ) Delete
Name: FONTAINE, PHR, DEBBIE
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: T ( ) Delete
Name: CONKLIN, BETTY JO
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: VP ( ) Delete
Name: HOES, DAVID
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: SEC ( ) Delete
Name: THAMES, MARSHA
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FONTAINE, DEBBIE
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: PP (X) Change ( ) Addition
Name: PINEDA, BONNIE
Address: PO BOX 49003
City-St-Zip: LEESBURG, FL 347490003

Title: PE (X) Change ( ) Addition
Name: MARCOUX, KELLY
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

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

Title: VP (X) Change ( ) Addition
Name: SHOVESTULL, DAWN
Address: PO BOX 490003
City-St-Zip: LEESBURG, FL 347490003

Title: ( ) Change ( ) Addition
Name:
Address:
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: DEBBIE FONTAINE P 01/28/2008

Electronic Signature of Signing Officer or Director — Date