

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003882

FILED
Apr 30, 2007
Secretary of State

Entity Name: THE AMERICAN ASSOCIATION FOR TEACHING AND CURRICULUM INCORPORATED

Current Principal Place of Business:

4240 YORKETOWNE RD.
ORLANDO, FL 328127958

New Principal Place of Business:

Current Mailing Address:

4240 YORKETOWNE RD.
ORLANDO, FL 328127958

New Mailing Address:

FEI Number: 74-2756770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KYSILKA, MARCELLA L
4240 YORKETOWNE RD.
ORLANDO, FL 328127958 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: PD () Delete
Name: VEAL, WILLIAM DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

Title: D () Delete
Name: DEETS, JENNIFER DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

Title: D () Delete
Name: CRAIG, CHERYL DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

Title: D () Delete
Name: BROWN, SUSAN C DR.
Address: 4240 YORKE TOWNE RD
City-St-Zip: ORLANDO, FL 329127958

Title: D () Delete
Name: ELSASSER, STACEY DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

Title: D () Delete
Name: ALAN, GARRETT DR.
Address: 4240 YORKETOWNE RD
City-St-Zip: ORLANDO, FL 32812 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARRETT, ALAN DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

Title: D (X) Change () Addition
Name: VEAL, WILLIAM DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

Title: D (X) Change () Addition
Name: RILEY, KAREN DR.
Address: 4240 YORKETOWNE RD.
City-St-Zip: ORLANDO, FL 328127958

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

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

Title: D (X) Change () Addition
Name: BROYLES, INDIA DR.
Address: 4240 YORKETOWNE RD
City-St-Zip: ORLANDO, FL 32812 US

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: MARCELLA L. KYSILKA

RA

04/30/2007

Electronic Signature of Signing Officer or Director

Date