

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009006

FILED  
Apr 16, 2006  
Secretary of State

**Entity Name:** CENTER FOR HOLISTIC INSTRUCTION, INC.

**Current Principal Place of Business:**

2706 52ND AVE  
VERO BEACH, FL 32966

**New Principal Place of Business:**

1455 48TH AVENUE  
VERO BEACH, FL 32966

**Current Mailing Address:**

P.O. BOX 592  
VERO BEACH, FL 32961

**New Mailing Address:**

**FEI Number:** 06-1666486

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FISHER, KAREN A  
2706 52 AVE  
VERO BEACH, FL 32966 US

**Name and Address of New Registered Agent:**

FISHER, KAREN A MNM  
1455 48TH AVENUE  
VERO BEACH, FL 32966 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: KAREN A FISHER, MNM

04/16/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FISHER, KAREN A  
Address: 2706 52 AVE  
City-St-Zip: VERO BEACH, FL 32966

Title: D ( ) Delete  
Name: KASER-VINAGRE, DIANE  
Address: 668 STEVENSON AVE  
City-St-Zip: SEBASTIAN, FL 32958

Title: D ( ) Delete  
Name: VINAGRE, FERNANDO MS BCBA  
Address: 668 STEVENSON AVE  
City-St-Zip: SEBASTIAN, FL 32958

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FISHER, KAREN A MNM  
Address: 1455 48TH AVENUE  
City-St-Zip: VERO BEACH, FL 32966 US

Title: D (X) Change ( ) Addition  
Name: ZISIADES, ANDREW J  
Address: 1455 48TH AVENUE  
City-St-Zip: VERO BEACH, FL 32966

Title: D (X) Change ( ) Addition  
Name: FISHER, DIRK L  
Address: 1455 48TH AVENUE  
City-St-Zip: VERO BEACH, FL 32966

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: KAREN A FISHER, MNM

D

04/16/2006

Electronic Signature of Signing Officer or Director

Date