2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004451

FILED Jan 05, 2012 Secretary of State

Entity Name: IMPACT STUDENT EVENTS INC.

Current Principal Place of Business: New Principal Place of Business:

1825 SE CARLIN AVE 3140 NE PINECREST LAKES BLVD PORT ST LUCIE, FL 34952 JENSEN BEACH, FL 34957

Current Mailing Address: New Mailing Address:

1825 SE CARLIN AVE 3140 NE PINECREST LAKES BLVD PORT ST LUCIE, FL 34952 JENSEN BEACH, FL 34957

FEI Number: 65-1197976 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:

TIMMERMAN, WILLIAM B

1825 SE CARLIN AVE

PORT ST. LUCIE, FL 34952 US

TIMMERMAN, WILLIAM B

3140 NE PINECREST LAKES BLVD

JENSEN BEACH, FL 34957 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: WILLIAM B. TIMMERMANM 01/05/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: TIMMERMAN, WILLIAM B
Address: 3140 NE PINECREST LAKES BLVD
City-St-Zip: JENSEN BEACH, FL 34957

Title: V

Name: LYNCH, SARAH

Address: 2843 SE WILTSHIRE TERR City-St-Zip: PORT ST. LUCIE, FL 34952

Title: S

 Name:
 MOSELEY, BRANDON

 Address:
 3993 KRISTEN ST

 City-St-Zip:
 SPRING HILL, TN 37174

Title:

Name: TIMMERMAN, JENNIFER B
Address: 3140 NE PINECREST LAKES BLVD
City-St-Zip: JENSEN BEACH, FL 34957

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM B. TIMMERMAN P 01/05/2012