

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008575

FILED
May 01, 2006
Secretary of State

Entity Name: THE CENTER FOR EDUCATIONAL AND LIFE COACHING, INC.

Current Principal Place of Business:

333 SE TRESSLER DRIVE
SUITE H
STUART, FL 34994 US

New Principal Place of Business:

2 ST LUCIE COURT
STUART, FL 34996 US

Current Mailing Address:

2 ST LUCIE COURT
STUART, FL 34996 US

New Mailing Address:

FEI Number: 20-0324390 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WERB, WENDY H ESQ
2 ST LUCIE COURT
STUART, FL 34996 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: DIR () Delete
Name: WERB, SUSAN F
Address: 561 MANOR DRIVE
City-St-Zip: STUART, FL 34996 US

Title: DIR () Delete
Name: WERB, WENDY H
Address: 2 ST LUCIE COURT
City-St-Zip: STUART, FL 34996 US

Title: DIR () Delete
Name: KLINGENSMITH, MARK W
Address: 2 ST LUCIE COURT
City-St-Zip: STUART, FL 34996 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR (X) Change () Addition
Name: LOVELACE, CHRISTINE
Address: 1342 SW EVERGREEN LN
City-St-Zip: PALM CITY, FL 34990 US

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: WENDY H. WERB

DIR

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date