

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003661

FILED
Apr 28, 2005
Secretary of State

Entity Name: COMPUTER ENRICHMENT CENTER, INC.

Current Principal Place of Business:

511 KENTIA RD
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

511 KENTIA RD
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 14-1906138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYS, SHERYL L
511 KENTIA RD
CASSELBERRY, FL 32707 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Change (X) Addition
Name: GRATER, HOWARD MR
Address: 9172 MONTEVELLO DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: P () Change (X) Addition
Name: DEAGUILERA, EDWARD MR
Address: 11419 VIA ANDIAMO
City-St-Zip: ORLANDO, FL 34786 US

Title: S () Change (X) Addition
Name: DENSON, ERIK MR
Address: 9463 TELFER RUN
City-St-Zip: ORLANDO, FL 32817 US

Title: D () Change (X) Addition
Name: MAYS, SHERYL L MS
Address: 511 KENTIA ROAD
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MD () Change (X) Addition
Name: MILES, SHEILA MS
Address: 2333 EHLEER LANE
City-St-Zip: WINTER PARK, FL 32729 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHERYL L. MAYS

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date