

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004838

FILED  
Mar 10, 2006  
Secretary of State

Entity Name: INDEPENDENT HOMESCHOOLERS' NETWORK, INC.

## Current Principal Place of Business:

308 LINDSEY COURT  
CAPE CANAVERAL, FL 32920

## New Principal Place of Business:

## Current Mailing Address:

308 LINDSEY COURT  
CAPE CANAVERAL, FL 32920

## New Mailing Address:

FEI Number: 20-1271623

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAVOIE, NORMAND  
308 LINDSEY COURT  
CAPE CANAVERAL, FL 32920 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: SCHULTZ, DANIELLE  
Address: 1702 TRIMBLE ROAD  
City-St-Zip: MELBOURNE, FL 32934

Title: V/D ( ) Delete  
Name: CRUM BAUGH, LINDA  
Address: 2866 PINEAPPLE AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: T/D ( ) Delete  
Name: NORMAND, LAURIE  
Address: 308 LINDSEY CT  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: S/D ( ) Delete  
Name: GRIFFIN, SHARON  
Address: 4224 CANBY DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: C/D (X) Delete  
Name: BARNETT, ANGIE  
Address: 2157 AUBURN LAKES DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: SCHULTZ, DANIELLE  
Address: 1702 TRIMBLE ROAD  
City-St-Zip: MELBOURNE, FL 32934

Title: V/D (X) Change ( ) Addition  
Name: CRUMBAUGH, LINDA  
Address: 2866 PINEAPPLE AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: T/D (X) Change ( ) Addition  
Name: NORMAND, LAVOIE  
Address: 308 LINDSEY CT  
City-St-Zip: CAPE CANAVERAL, FL 32920

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

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

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: NORMAND LAVOIE

T/D

03/10/2006

Electronic Signature of Signing Officer or Director

Date