

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007982

FILED  
Feb 09, 2006  
Secretary of State

**Entity Name:** KNIGHTS OF PYTHAGORAS MENTORING NETWORK, INC.

**Current Principal Place of Business:**

3107 SOUTHWEST 20TH TERRACE  
A-2  
DELRAY BEACH, FL 334457335 US

**New Principal Place of Business:**

3107 SOUTHWEST 20TH TERRACE  
SUITE 20A-2  
DELRAY BEACH, FL 334457335 US

**Current Mailing Address:**

C/O GRUBER AND ASSOCIATES, P.A.  
6550 NORTH FEDERAL HIGHWAY, SUITE 522  
FORT LAUDERDALE, FL 333081417 US

**New Mailing Address:**

FEI Number: 61-1479812      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ALLEN, C. RON  
3107 SOUTHWEST 20TH TERRACE  
A-2  
DELRAY BEACH, FL 334457335 US

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

ALLEN, C. RON  
3107 SOUTHWEST 20TH TERRACE  
SUITE #20A-2  
DELRAY BEACH, FL 334457335 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: C. RON ALLEN

02/09/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ED ( ) Delete  
Name: ALLEN, C. RON  
Address: 3107 SOUTHWEST 20TH TERRACE, #A-2  
City-St-Zip: DELRAY BEACH, FL 334457335 US

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

Title: ED (X) Change ( ) Addition  
Name: ALLEN, C. RON  
Address: 3107 SOUTHWEST 20TH TERRACE, SUITE #20A-2  
City-St-Zip: DELRAY BEACH, FL 334457335 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: C. RON ALLEN

ED

02/09/2006

Electronic Signature of Signing Officer or Director

Date