

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010995

FILED  
May 02, 2008  
Secretary of State

**Entity Name:** EDUCATION & ENLIGHTENMENT GROUP, INC.

**Current Principal Place of Business:**

115 W CRAWFORD STREET  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 93220  
LAKELAND, FL 33804

**New Mailing Address:**

**FEI Number:** 75-3171990      **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:**

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

WILLIAMS, JEFFREY  
115 W CRAWFORD STREET  
LAKELAND, FL 33805 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WILLIAMS, JEFFREY  
Address: 115 W CRAWFORD STREET  
City-St-Zip: LAKELAND, FL 33805 US

Title: V ( ) Delete  
Name: SIMPKINS, LYNNE  
Address: 2917 MARTHA AVE  
City-St-Zip: LAKELAND, FL 33805 US

Title: S ( ) Delete  
Name: WRIGHT, ARDRENE  
Address: 904 NEW YORK AVE  
City-St-Zip: LAKELAND, FL 33805 US

Title: T ( ) Delete  
Name: JOSEPH, DEIDRA M  
Address: 3579 MANOR LOOP  
City-St-Zip: LAKELAND, FL 33810 US

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

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

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

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 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: JEFFREY WILLIAMS

P

05/02/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date