

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011096

FILED
Jul 02, 2007
Secretary of State

Entity Name: STUDENT DRUG TESTING OF AMERICA, INC

Current Principal Place of Business:

2191 JULIAN AVE
2
PALM BAY, FL 32905 US

New Principal Place of Business:

Current Mailing Address:

2191 JULIAN AVE
2
PALM BAY, FL 32905 US

New Mailing Address:

FEI Number: 20-3113418 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:

REILLY, JOSEPH F
2191 JULIAN AVE
2
PALM BAY, FL 32905 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: TAULE, ELAINE
Address: 2188 W ATLANTIC AVE
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: VP () Delete
Name: CAMPBELL, JAMES
Address: 12000 LINCOLN DRIVE #310
City-St-Zip: MARLTON, NJ 08053 US

Title: S () Delete
Name: REILLY, JOSEPH F
Address: 2191 JULIAN AVE
City-St-Zip: PALM BAY, FL 32905 US

Title: T () Delete
Name: REILLY, JOSEPH
Address: 2191 JULIAN AVE
City-St-Zip: PALM BAY, FL 32905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TAULE, ELAINE
Address: 2901 SOUTH CONGRESS AVE.
City-St-Zip: PALM SPRINGS, FL 33461 US

Title: VP (X) Change () Addition
Name: REILLY, JOSEPH F
Address: 2191 JULIAN AVE
City-St-Zip: PALM BAY, FL 32905 US

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

Title: T (X) Change () Addition
Name: REILLY, JOSEPH F
Address: 2191 JULIAN AVE
City-St-Zip: PALM BAY, FL 32905

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: JOSEPH F REILLY

S

07/02/2007

Electronic Signature of Signing Officer or Director

Date