

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000012012

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** SUNSHINE STATE EDUCATIONAL CLUBS, INC.

**Current Principal Place of Business:**

1 JUNGLEPLUM COURT EAST  
HOMOSASSA, FL 344464275

**New Principal Place of Business:**

**Current Mailing Address:**

1 JUNGLEPLUM COURT EAST  
HOMOSASSA, FL 344464275

**New Mailing Address:**

**FEI Number:** 86-1125377

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILKERSON, BRUCE D  
1 JUNGLEPLUM COURT EAST  
HOMOSASSA, FL 344464275 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:** D  
**Name:** WILKERSON, BRUCE D  
**Address:** 1 JUNGLEPLUM COURT EAST  
**City-St-Zip:** HOMOSASSA, FL 344464275

**Title:** P  
**Name:** WILKERSON, CHRISTINE M  
**Address:** 1 JUNGLEPLUM COURT EAST  
**City-St-Zip:** HOMOSASSA, FL 344464275

**Title:** S  
**Name:** BALLARD, CAROL  
**Address:** 11194 TUSCANNY AVE.  
**City-St-Zip:** SPRING HILL, FL 34608

**Title:** VP  
**Name:** KOZLOW, JOANNE  
**Address:** 7092 OREGON CHICKADEE RD  
**City-St-Zip:** WEEELI WACHEE, FL 34613

I hereby 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 all other like empowered.

**SIGNATURE:** BRUCE WILKERSON

D

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date