2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2011
Secretary of State

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Entity Name: INSTITUTE FOR SELF ACTIVE EDUCATION, INC.

Current Principal Place of Business:

2255 MEADOWLANE AVE
WEST MELBOURNE, FL 32904 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 511001
MELBOURNE BEACH, FL 32951 US

New Mailing Address:

FEI Number: 14-1917354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DREW, WALTER F
103 BUDRIS ROAD
MELBOURNE BEACH, FL 32951 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: P
Name: DREW, WALTER F
Address: 103 BUDRIS ROAD
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: VP
Name: DREW, KATHERINE V
Address: 103 BUDRIS ROAD
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: SEC
Name: BUSH, DEBORAH E
Address: 214 CHERRY DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: V
Name: NELL, MARCIA
Address: 340 NELL ROAD
City-St-Zip: EAST BERLIN, PA 17316

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: WALTER F DREW D 03/16/2011
Electronic Signature of Signing Officer or Director Date