

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005893

FILED
Jan 29, 2006
Secretary of State

Entity Name: THE POLARIS LEARNING INITIATIVE, INC.

Current Principal Place of Business:

4446 HENDRICKS AVE
338
JACKSONVILLE, FL 32207

New Principal Place of Business:

4362 KELNEPA DR.
JACKSONVILLE, FL 322076226 62

Current Mailing Address:

4446 HENDRICKS AVE
338
JACKSONVILLE, FL 32207

New Mailing Address:

4362 KELNEPA DR.
JACKSONVILLE, FL 322076226 62

FEI Number: 20-2959941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROCKDORF, SOREN
4362 KELNEPA DR
JACKSONVILLE, FL 32207 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 () Delete
Name: BROCKDORF, SOREN
Address: 4362 KELNEPA DR.
City-St-Zip: JACKSONVILLE, FL 32207

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: BAIRD, DANA
Address: 3384 BARROW HILL TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

Title: SC () Change (X) Addition
Name: GRIZZARD, VERNON
Address: 4446 HENDRICKS AVE
City-St-Zip: JACKSONVILLE, FL 32207

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: SOREN BROCKDORF

PRES

01/29/2006

Electronic Signature of Signing Officer or Director

Date