

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007859

FILED
May 01, 2006
Secretary of State

Entity Name: SOCIETY OF PARENTS LENDING ALL-INCLUSIVE SUPPORT FOR HOMESCHOOLERS, INC.

Current Principal Place of Business:

712 S.W. 9TH STREET
FORT LAUDERDALE, FL 33315 US

New Principal Place of Business:

Current Mailing Address:

712 S.W. 9TH STREET
FORT LAUDERDALE, FL 33315 US

New Mailing Address:

FEI Number: 83-0435684 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MILLER, CLAUDIA V
712 S.W. 9TH STREET
FORT LAUDERDALE, FL 33315 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: MILLER, CLAUDIA V
Address: 712 S.W. 9TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315 US

Title: VP () Delete
Name: BRUMET, ANNE O
Address: 8660 N.W. 25TH STREET
City-St-Zip: SUNRISE, FL 33322 US

Title: S () Delete
Name: WEST, DEBORAH D
Address: 3944 INVERRARY DRIVE
City-St-Zip: LAUDERHILL, FL 33319 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WEST, DEBORAH D
Address: 3944 INVERRARY DRIVE
City-St-Zip: LAUDERHILL, FL 33319 US

Title: S (X) Change () Addition
Name: ROTH, KRISTY
Address: 7802 NW 67TH AVENUE
City-St-Zip: TAMARAC, FL 33321 US

Title: DIR () Change (X) Addition
Name: BERGBAUER, PATRICIA
Address: 8202 NW 38TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065 US

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: CLAUDIA V. MILLER

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date