

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011091

FILED
Aug 20, 2006
Secretary of State

Entity Name: FLORIDA ACCESS TO KNOWLEDGE AND SERVICES, INC.

Current Principal Place of Business:

115 HICKORY STREET
W MELBOURNE, FL 32904

New Principal Place of Business:

115 HICKORY STREET
205
W MELBOURNE, FL 32904

Current Mailing Address:

115 HICKORY STREET
W MELBOURNE, FL 32904

New Mailing Address:

115 HICKORY STREET
205
W MELBOURNE, FL 32904

FEI Number: **FEI Number Applied For (X)** **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:

ST JUSTE, RAPHAEL
115 HICKORY STREET
W MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

ST JUSTE, RAPHAEL
115 HICKORY STREET
205
W MELBOURNE, FL 32904 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: RAPHAEL ST JUSTE

08/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ST JUSTE, RAPHAEL
Address: 115 HICKORY STREET
City-St-Zip: W MELBOURNE, FL 32904

Title: V () Delete
Name: CIVIL, JETTA
Address: 115 HICKORY STREET
City-St-Zip: W MELBOURNE, FL 32904

Title: S () Delete
Name: BELFONT, ROSA
Address: 115 HICKORY STREET
City-St-Zip: W MELBOURNE, FL 32904

Title: D () Delete
Name: GHYS, MARILYN
Address: 1591 ROBERT J CONLAN BLVD
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: MCINTYRE, SHAYLA
Address: 4620 LIPSCOMB STREET
City-St-Zip: PALM BAY, FL 32905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ST JUSTE, RAPHAEL
Address: 115 HICKORY STREET #205
City-St-Zip: W MELBOURNE, FL 32904

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

Title: S (X) Change () Addition
Name: BELFONT, ROSA
Address: 1064 HELENA AVENUE NW
City-St-Zip: PALM BAY, FL 32907

Title: D (X) Change () Addition
Name: CLOTILDE, AUGUSTIN
Address: 271 EMERSON DRIVE
City-St-Zip: PALM BAY, FL 32907

Title: D (X) Change () Addition
Name: PAUL, METAYER
Address: 451 CAROLINA AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

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: RAPHAEL ST JUSTE

D

08/20/2006

Electronic Signature of Signing Officer or Director

Date