


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

2/ FILED
Mar 22, 2006 8:00 am
Secretary of State

02-28-2006 90009 028 ****61.25

DOCUMENT # N05000011389					
1. Entity Name EXPOSITORS SEMINARY, INC.					
Principal Place of Business 1010 EAST BRANDON BOULEVARD BRANDON, FL 33511			Mailing Address 1010 EAST BRANDON BOULEVARD BRANDON, FL 33511		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
6. Name and Address of Current Registered Agent PIXLEY, CHRIS 1010 EAST BRANDON BOULEVARD BRANDON, FL 33511				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when resigning) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WRAGG, JERRY 17475 JONATHAN DRIVE JUPITER, FL 33477	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PID WRAGG, JERRY 17475 JONATHAN DRIVE JUPITER, FL 33477	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRELOFF, STEVE 1893 SUNSET POINT ROAD CLEARWATER, FL 33765	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VID KRELOFF, STEVE 1893 SUNSET POINT ROAD CLEARWATER, FL 33765	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PIXLEY, CHRIS 1010 EAST BRANDON BOULEVARD BRANDON, FL 33511	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SID PIXLEY, CHRIS 1010 EAST BRANDON BOULEVARD BRANDON, FL 33511	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DUNLAP, DONOVAN 17475 JONATHAN DRIVE JUPITER, FL 33477	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VID DUNLAP, DONOVAN 17475 JONATHAN DRIVE JUPITER, FL 33477	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHRISTMAS, SCOTT 10938 HOOD ROAD SOUTH JACKSONVILLE, FL 32257	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ZEMEK, GEORGE 1911 CANTRELL ROAD LITTLE ROCK, AR 72223	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIEZ, DAVE 4471 NW 38TH STREET #214 MIAMI SPRINGS, FL 33166	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D QUINN, LANCE 1911 CANTRELL ROAD LITTLE ROCK, AR 72223	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____				01/10/2006 813-662-9622	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	

66006388



01102006 Chg-NP CR2E037 (11/05)

4. FEI Number 20-3857710 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

FL Zip Code

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WRAGG, JERRY	
STREET ADDRESS	17475 JONATHAN DRIVE	
CITY - ST - ZIP	JUPITER, FL 33477	
TITLE	D	<input type="checkbox"/> Delete
NAME	KRELOFF, STEVE	
STREET ADDRESS	1893 SUNSET POINT ROAD	
CITY - ST - ZIP	CLEARWATER, FL 33765	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIXLEY, CHRIS	
STREET ADDRESS	1010 EAST BRANDON BOULEVARD	
CITY - ST - ZIP	BRANDON, FL 33511	
TITLE	D	<input type="checkbox"/> Delete
NAME	DUNLAP, DONOVAN	
STREET ADDRESS	17475 JONATHAN DRIVE	
CITY - ST - ZIP	JUPITER, FL 33477	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHRISTMAS, SCOTT	
STREET ADDRESS	10938 HOOD ROAD SOUTH	
CITY - ST - ZIP	JACKSONVILLE, FL 32257	
TITLE	D	<input type="checkbox"/> Delete
NAME	DIEZ, DAVE	
STREET ADDRESS	4471 NW 38TH STREET #214	
CITY - ST - ZIP	MIAMI SPRINGS, FL 33166	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRAGG, JERRY	
STREET ADDRESS	17475 JONATHAN DRIVE	
CITY - ST - ZIP	JUPITER, FL 33477	
TITLE	VID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRELOFF, STEVE	
STREET ADDRESS	1893 SUNSET POINT ROAD	
CITY - ST - ZIP	CLEARWATER, FL 33765	
TITLE	SID	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIXLEY, CHRIS	
STREET ADDRESS	1010 EAST BRANDON BOULEVARD	
CITY - ST - ZIP	BRANDON, FL 33511	
TITLE	VID	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUNLAP, DONOVAN	
STREET ADDRESS	17475 JONATHAN DRIVE	
CITY - ST - ZIP	JUPITER, FL 33477	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZEMEK, GEORGE	
STREET ADDRESS	1911 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK, AR 72223	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	QUINN, LANCE	
STREET ADDRESS	1911 CANTRELL ROAD	
CITY - ST - ZIP	LITTLE ROCK, AR 72223	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/10/2006

Date

813-662-9622

Daytime Phone #



ATTACHMENT

10006388

FLORIDA DEPARTMENT OF STATE
Division of Corporations

*Please see
attached
3/20/06*

March 2, 2006

EXPOSITORS SEMINARY, INC.
1010 EAST BRANDON BOULEVARD
BRANDON, FL 33511

Subject: **EXPOSITORS SEMINARY, INC.**

Reference Number: **05000011389**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CD

ANNUAL REPORTS SECTION