

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05900

FILED  
Aug 26, 2008  
Secretary of State

**Entity Name:** JUNIOR ACHIEVEMENT OF EAST CENTRAL FLORIDA, INCORPORATED

**Current Principal Place of Business:**

571 HAVERTY CT  
SUITE L  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

571 HAVERTY CT  
SUITE L  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

571 HAVERTY CT  
SUITE L  
ROCKLEDGE, FL 32955

**FEI Number:** 59-2461562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
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:**

SECOR, JENNIFER PRES  
571 HAVERTY CT  
SUITE L  
ROCKLEDGE, FL 32955 US

**Name and Address of New Registered Agent:**

CLARK, TAMBRE E PRES  
571 HAVERTY CT  
SUITE L  
ROCKLEDGE, FL 32955 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: TAMBRE E. CLARK

08/26/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SEC ( ) Delete  
Name: CHRISTIE, MARLA  
Address: 1775 W. HIBISCUS  
City-St-Zip: MELBOURNE, FL 32901

Title: PCD ( ) Delete  
Name: KEIMER, ROBERT  
Address: 105 SANDY SHORES DRIVE  
City-St-Zip: MELBOURNE, FL 32951

Title: PCD ( ) Delete  
Name: ROCHESTER, PETER  
Address: 100 SYKES CREEK PARKWAY  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD ( ) Delete  
Name: ALEXANDER, LISA MD  
Address: 951 N. WASHINGTON AVE  
City-St-Zip: TITUSVILLE, FL 32796

Title: PCD ( ) Delete  
Name: MALEK, MARK  
Address: 202 N. HARBOR CITY BLVD, SUITE 200  
City-St-Zip: MELBOURNE, FL 32935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SEC (X) Change ( ) Addition  
Name: CRAIG, CAROL  
Address: 107 BUCHANAN AVENUE  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: PCD (X) Change ( ) Addition  
Name: MALEK, MARK  
Address: 202 NORTH HARBOR CITY BLVD., SUITE 200  
City-St-Zip: MELBOURNE, FL 32935

Title: VCD (X) Change ( ) Addition  
Name: SORENSEN, SCOTT  
Address: 950 WEST EAU GALLIE BLVD.  
City-St-Zip: MELBOURNE, FL 32935

Title: CD (X) Change ( ) Addition  
Name: ALEXANDER, LISA MD  
Address: 951 N. WASHINGTON AVE  
City-St-Zip: TITUSVILLE, FL 32796

Title: TD (X) Change ( ) Addition  
Name: BAUGH, PEGGY  
Address: 215 BAYTREE DRIVE  
City-St-Zip: MELBOURNE, FL 32940

I hereby certify that the information supplied with this filing does not qualify 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: LISA ALEXANDER, MD

CD

08/26/2008

Electronic Signature of Signing Officer or Director

Date