2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2011
Secretary of State

DOCUMENT# N06000006705

Entity Name: EXTENSION PROFESSIONAL ASSOCIATIONS OF FLORIDA, INC.

Current Principal Place of Business:

2800 NORTH EAST 39 AVENUE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

1010 N. MCDUFF AVENUE
JACKSONVILLE, FL 32254

New Mailing Address:

FEI Number: 74-3183035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWEAT, MICHAEL S
1010 N. MCDUFF AVENUE
JACKSONVILLE, FL 32254 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: S
Name: CINDY, SANDERS
Address: 2800 NE 39 AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: C
Name: HOGUE, PATRICK
Address: 458 HWY 98 N.
City-St-Zip: OKEECHOBEE, FL 34972

Title: T
Name: SWEAT, MICHAEL
Address: 1010 N. MCDUFF AVENUE
City-St-Zip: JACKSONVILLE, FL 32254

Title: MGR
Name: MADDOX, MARTHA
Address: 7620 STATE ROAD 471 SUITE 2
City-St-Zip: BUSHNELL, FL 33513

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL S. SWEAT T 02/17/2011

Electronic Signature of Signing Officer or Director Date