2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# N06000008778

Entity Name: NATIONAL EDUCATION EMPOWERMENT FOUNDATION, INC.

Current Principal Place of Business:

1225 DARLINGTON OAK CIRCLE NE
SAINT PETERSBURG, FL 33703

New Principal Place of Business:

Current Mailing Address:

1225 DARLINGTON OAK CIRCLE NE
SAINT PETERSBURG, FL 33703

New Mailing Address:

FEI Number: 14-1974108 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHER, ROBERT S JR.
1225 DARLINGTON OAK CIRCLE NE
SAINT PETERSBURG, FL 33703 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: MD ( ) Delete
Name: FISHER, ROBERT S JR.
Address: 1225 DARLINGTON OAK CIR. NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D ( ) Delete
Name: LUMETTA, JEFF
Address: 9773 FOREST RIDGE DR.
City-St-Zip: CLARKSTON, MI 48348

Title: D ( ) Delete
Name: INGOLD, TIM
Address: 10856 NOHAWK RD.
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D ( ) Delete
Name: BACON, DAVID A ESQ
Address: 2969 FIRST AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ROBERT S. FISHER, JR MD 01/11/2008

Electronic Signature of Signing Officer or Director — Date