

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009234

FILED
Apr 24, 2008
Secretary of State

Entity Name: CHILDREN'S AG & SCIENCE ADVENTURES, INC.

Current Principal Place of Business:

7742 COVEDALE DRIVE
ORLANDO, FL 32818 US

New Principal Place of Business:

19 N. WESTMORELAND DRIVE
ORLANDO, FL 32805 US

Current Mailing Address:

7742 COVEDALE DRIVE
ORLANDO, FL 32818 US

New Mailing Address:

FEI Number: 20-5471491 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JETER, DONNA
7742 COVEDALE DRIVE
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

JETER-WILSON, DONNA
7742 COVEDALE DRIVE
ORLANDO, FL 32818 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: DONNA JETER-WILSON

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: JETER, DONNA
Address: 7742 COVEDALE DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: VP () Delete
Name: JETER, ASYA
Address: 7742 COVEDALE DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: S () Delete
Name: WRIGHT, CASSANDRA
Address: 7012 HIAWASSEE OAKS
City-St-Zip: ORLANDO, FL 32818

Title: T () Delete
Name: FLOYD, LAUREN
Address: 7742 COVERDALE DR
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: RUSS, MARK
Address: 1406 CROOMS
City-St-Zip: ORLANDO, FL 32811

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: T () Change (X) Addition
Name: ISRAEL, JUDITH
Address: 19 N. WESTMORELAND DRIVE
City-St-Zip: ORLANDO, FL 32805

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: DONNA JETER-WILSON

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date