2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007362

FILED Apr 20, 2011 Secretary of State

Entity Name: EDUCATION NETWORK OF CHRISTIAN HOME SCHOOLERS, INC.

Current Principal Place of Business: New Principal Place of Business:

3093 STOWE TERRACE 3715 WOODBRIDGE AVE NORTH PORT, FL 34286 NORTH PORT, FL 34287

Current Mailing Address: New Mailing Address:

3093 STOWE TERRACE 3715 WOODBRIDGE AVE NORTH PORT, FL 34286 NORTH PORT, FL 34287

FEI Number: 87-0808062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SNIDER, ROBIN

3093 STOWE TERRACE

NORTH PORT, FL 34286 US

BONSKY, ANNE

3715 WOODBRIDGE AVE

NORTH PORT, FL 34287 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: ANNE PARKS BONSKY 04/20/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: AMSBAUGH, DEBBIE Address: 260 HAMMOCK TERRACE City-St-Zip: VENICE, FL 34293

Title: VD

Name: ROMAN, ANN Address: P.O. BOX 522

City-St-Zip: BOCA GRANDE, FL 33921

Title: DT

Name: BONSKY, ANNE

Address: 3715 WOODBRIDGE AVENUE City-St-Zip: NORTH PORT, FL 34287

Title: DS

Name:

Address: City-St-Zip: CAMPOLI, KIM 7395 W. PRICE BLVD. NORTH PORT, FL 34291

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: ANNE PARKS BONSKY DT 04/20/2011