

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 13, 2009
Secretary of State**

DOCUMENT# N07000007978

Entity Name: SOARING EAGLES EDUCATIONAL AND COUNSELING CENTER INC.

Current Principal Place of Business:

4180 SW 11TH STREET
PLANTATION, FL 33317 BR

New Principal Place of Business:

Current Mailing Address:

4180 SW 11TH STREET
PLANTATION, FL 33317 BR

New Mailing Address:

FEI Number: 26-1208563 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLYMORE, RALPH S
3074 MARTELLO DRIVE
MARGATE, FL 333063 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: P () Delete
Name: USTICK, DONNA T
Address: 4180 SW 11TH STREET
City-St-Zip: PLANTATION, FL 33317 BR

Title: VP () Delete
Name: COLLYMORE, RALPH S
Address: 3074 MARTELLO DRIIVE
City-St-Zip: MARGATE, FL 33063 BR

Title: TRES () Delete
Name: USTICK, DONNA T
Address: 4180 SW 11TH STTREET
City-St-Zip: PLANTATION, FL 33317 BR

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:

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 USTICK

P

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date