

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010572

FILED  
Mar 13, 2008  
Secretary of State

Entity Name: HOME EDUCATION AFTER RIGHTEOUS TEACHING, INC.

## Current Principal Place of Business:

5664 PECAN ROAD  
OCALA, FL 34472

## New Principal Place of Business:

6 PINE PASS  
OCALA, FL 34472 US

## Current Mailing Address:

5664 PECAN ROAD  
OCALA, FL 34472

## New Mailing Address:

P.O. BOX 830004  
OCALA, FL 34483 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMANIEGO, BRENDA  
5664 PECAN ROAD  
OCALA, FL 34472 US

## Name and Address of New Registered Agent:

BOWLEY, KIMBERLY  
6 PINE PASS  
OCALA, FL 34472 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: KIMBERLY BOWLEY

03/13/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SAMANIEGO, BRENDA  
Address: 7685 SW 17TH PLACE  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: COMFORT, KATRINA  
Address: 6 PINE PASS  
City-St-Zip: OCALA, FL 34482

Title: D ( ) Delete  
Name: GILMER, DEBBIE  
Address: 7981 SE 126TH PLACE  
City-St-Zip: BELLEVUE, FL 34420

Title: D ( ) Delete  
Name: DIVAN, DAWN  
Address: 5664 PECAN ROAD  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: BOWLEY, KIMBERLY  
Address: 10451 NW 21ST STREET  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: POLLARD, DIANE  
Address: 12041 SE 72ND TERRACE ROAD  
City-St-Zip: BELLEVUE, FL 34420

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: POLLARD, DIANE  
Address: 7981 SE 126 PLACE  
City-St-Zip: BELLEVUE, FL 34420 US

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, VALERIE  
Address: 13980 SE 80TH AVE  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: D (X) Change ( ) Addition  
Name: MERCER, SPRING  
Address: 14791 SW 29T H AVE RD  
City-St-Zip: OCALA, FL 34473 US

Title: D (X) Change ( ) Addition  
Name: BRADFORD, AMY SUE  
Address: 1622 NW 42ND PLACE  
City-St-Zip: OCALA, FL 34475 US

Title: D (X) Change ( ) Addition  
Name: BASS, KIM  
Address: 3426 SE 5TH PLACE  
City-St-Zip: OCALA, FL 34471 US

Title: D (X) Change ( ) Addition  
Name: ARAN, LUIS  
Address: P.O. BOX 1692  
City-St-Zip: DUNNELLON, FL 34430 US

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: KIMBERLY BOWLEY

D

03/13/2008

Electronic Signature of Signing Officer or Director

Date