2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011196

FILED Apr 30, 2008 Secretary of State

Entity Name: COMMUNITY OF LEARNING STPETE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 725 8TH STREET NORTH #7 SAINT PETERSBURG, FL 33701 **Current Mailing Address: New Mailing Address:** 725 8TH STREET NORTH #7 SAINT PETERSBURG, FL 33701 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANNION, KATHLEEN 725 8TH STREET NORTH #7 SAINT PETERSBURG, FL 33701 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GLENN, RAYMOND Name: Name: 725 8TH STREET NORTH #7 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: Title: VCD () Delete Title: SD (X) Change () Addition DARULLA, ALAN Name: MANNION, KATHLEEN Name: Address: 725 8TH STREET NORTH #7 Address: 725 8TH STREET NORTH #7 City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701 Title: () Delete Title: TD (X) Change () Addition MANNION, KATHLEEN HAYES, PHILLIP Name: Name: 725 8TH STREET NORTH #7 725 8TH STREET NORTH #7 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701 Title: TD () Delete Title: FOD (X) Change () Addition Name: HAYES, PHILLIP Name: GARBER, GARL ED 725 8TH STREET NORTH #7 Address: Address: 725 8TH STREET NORTH #7 City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701 Title: FOD (X) Delete Title: () Change () Addition GARBER, GARL ED Name: Name: 725 8TH STREET NORTH #7 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33701 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: RAYMOND E GLENN CD 04/30/2008