2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006983

FILED Apr 30, 2009 Secretary of State

Entity Name: PARENT EDUCATOR ASSISTANCE AND RESOURCES, INC.

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

3151 COTTONWOOD BEND 1665 LINHART AVENUE #1303 FORT MYERS, FL 33901

FORT MYERS, FL 33905

Current Mailing Address: New Mailing Address:

3151 COTTONWOOD BEND 1665 LINHART AVENUE #1303 FORT MYERS, FL 33901

#1303 FORT MYE FORT MYERS, FL 33905

FEI Number: 01-0915941 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:

HICKS, REGINA D
3151 COTTONWOOD BEND
41303
FORT MYERS, FL 33905 US
HICKS, REGINA D
1665 LINHART AVENUE
FORT MYERS, FL 33901 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: 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition

 Name:
 HICKS, REGINA D
 Name:
 HICKS, REGINA D

 Address:
 3151 COTTONWOOD BEND #1303
 Address:
 1665 LINHART AVENUE

 City-St-Zip:
 FORT MYERS, FL 33905
 City-St-Zip:
 FORT MYERS, FL 33901

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: REGINA D. HICKS PD 04/30/2009