

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009632

FILED
Jul 01, 2009
Secretary of State

Entity Name: ABA NETWORK EDUCATIONAL PROGRAM, INC.

Current Principal Place of Business:

5014 25TH STREET EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

5014 25TH STREET EAST
BRADENTON, FL 34203

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRITZ, SHELLY
5014 25TH STREET EAST
BRADENTON, FL 34203 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: D () Delete
Name: FRITZ, SHELLY
Address: 5014 25TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: BINDER-KATZ, ANNE
Address: 5014 25TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: FRITZ, BETTE
Address: 5014 25TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change () Addition
Name: FRITZ, SHELLY
Address: 5014 25TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

Title: MRS. (X) Change () Addition
Name: BINDER-KATZ, ANNE
Address: 5014 25TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

Title: MRS. (X) Change () Addition
Name: FRITZ, BETTE
Address: 5014 25TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

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: SHELLY FRITZ

MS.

07/01/2009

Electronic Signature of Signing Officer or Director

Date