2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2010
Secretary of State

DOCUMENT# N09000005044

Entity Name: TRANSFERABLE SKILLS NETWORK, INC.

Current Principal Place of Business:

2424 SW 58 MANOR
FT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

2424 SW 58 MANOR
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 27-0335697 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

COX, CHARLEENA
2424 SW 58 MANOR
FT LAUDERDALE, FL 33312 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
Name: COX, CHARLEENA
Address: 2424 SW 58 MANOR
City-St-Zip: FT LAUDERDALE, FL 33312

Title: V
Name: CHANG, JIM
Address: 2424 SW 58 MANOR
City-St-Zip: FT LAUDERDALE, FL 33312

Title: D
Name: NATION, MICHAEL
Address: 2424 SW 58 MANOR
City-St-Zip: FT LAUDERDALE, FL 33312

Title: T
Name: GANNA, SANDY
Address: 2424 SW 58 MANOR
City-St-Zip: FT LAUDERDALE, FL 33312

Title: S
Name: CORREA, EVELYN
Address: 2424 SW 58 MANOR
City-St-Zip: FT LAUDERDALE, FL 33312

I hereby 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 all other like empowered.

SIGNATURE: CHARLEENA C. COX PRES 05/06/2010
Electronic Signature of Signing Officer or Director Date