

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006563

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** EXPANDED OPPORTUNITIES, INC.

**Current Principal Place of Business:**

167 FLOYD ALLEN DRIVE  
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

167 FLOYD ALLEN DRIVE  
MONTICELLO, FL 32344

**New Mailing Address:**

**FEI Number:** 26-4112668

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

RUSSELL, DONALD  
6014 CENTERVILLE ROAD  
TALLAHASSEE, FL 32309 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:** PD  
**Name:** HOUSTON, THEODORE  
**Address:** 2404 MEXIA AVENUE  
**City-St-Zip:** TALLAHASSEE, FL 32304

**Title:** VD  
**Name:** MCLIN, JEROME  
**Address:** 701 N. BARBER HILL ROAD  
**City-St-Zip:** LAMONT, FL 32336

**Title:** TD  
**Name:** RUSSELL, DONALD  
**Address:** 6014 CENTERVILLE ROAD  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** SD  
**Name:** THOMPSON, MILLICENT  
**Address:** 8687 WAUKENNAH HIGHWAY  
**City-St-Zip:** MONTICELLO, FL 32344

**Title:** D  
**Name:** GLENN, THOMAS  
**Address:** 163 FLOYD-ALLEN  
**City-St-Zip:** MONTICELLO, FL 32344

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:** DONALD RUSSELL

TD

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date