

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011520

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** TEACH ONE, ENTERPRISES, INC

**Current Principal Place of Business:**

3123 S SEMORAN BLVE  
#292  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

3123 S SEMORAN BLVE  
#292  
ORLANDO, FL 32822

**New Mailing Address:**

**FEI Number:** 27-1795461      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SLATER, CHERYL L  
3123 S SEMORAN BLVD  
#292  
ORLANDO, FL 32822 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: C  
Name: THORPE, ALEXIS  
Address: 5434 LAFAYETTE PR. DR. N  
City-St-Zip: JACKSONVILLE, FL 32244 FL

Title: BM  
Name: DOWNEY, DEBBIE  
Address: 9456 ARBOR OAK LANE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: BM  
Name: FEARS, BENITA  
Address: 1579 HURST PLACE  
City-St-Zip: JACKSONVILLE, FL 32822

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: CHERYL L. SLATER

DIR

04/14/2010

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

\_\_\_\_\_  
Date