

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007756

FILED
Apr 30, 2012
Secretary of State

Entity Name: IVY RESEARCH & EDUCATION INSTITUTE INC

Current Principal Place of Business:

11505 FAIRCHILD GARDENS AVENUE
SUITE 101
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

8645 N. MILITARY TRAIL
SUITE 508
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

11505 FAIRCHILD GARDENS AVENUE
SUITE 101
PALM BEACH GARDENS, FL 33410

New Mailing Address:

8645 N. MILITARY TRAIL
SUITE 508
PALM BEACH GARDENS, FL 33410

FEI Number: 45-3044984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MIKAELA B
11505 FAIRCHILD GARDENS AVENUE
SUITE 101
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

STOESSEL, RUEL T
8645 N. MILITARY TRAIL
SUITE 508
PALM BEACH GARDENS, FL 33410 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: RUEL T. STOESSEL

04/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STOESSEL, RUEL T
Address: 8645 N. MILITARY TRAIL SUITE 508
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VP
Name: GARCIA, MIKAELA B
Address: 8645 N. MILITARY TRAIL SUITE 508
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: CBM
Name: STOESSEL, LONSDALE
Address: 8645 N. MILITARY TRAIL SUITE 508
City-St-Zip: PBG, FL 33410 US

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: MIKAELA B GARCIA

VP

04/30/2012

Electronic Signature of Signing Officer or Director

Date