2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N30121

Entity Name: INSTITUTE OF SPECIALIZED TRAINING & MANAGEMENT, INC.

Current Principal Place of Business:

853 SEMORAN BOULEVARD
SUITE 200
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

853 SEMORAN BOULEVARD
SUITE 200
CASSELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 59-2942202 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CASORIA, CY
1040 BAYVIEW DR.
FORT LAUDERDALE, FL 33304 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: PDT ( ) Delete
Name: FIKE, C. M. II
Address: 2000 W COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: SD ( ) Delete
Name: JONES, DON
Address: 2350 BEDMAN CREEK ROAD
City-St-Zip: ALVA, FL 33920

Title: D ( ) Delete
Name: PACE, JOE
Address: 1230 S. SOUTHLAKE DR.
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FIKE, RUTH E
Address: 2000 W COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: R ESTHER FIKE PRES 04/30/2008

Electronic Signature of Signing Officer or Director — Date