2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48485

FILED Apr 30, 2007 Secretary of State

Entity Name: THE JUNIOR ACHIEVEMENT FOUNDATION FOR ECONOMIC EDUCATION, INC.

Current Principal Place of Business: New Principal Place of Business: 571 HAVERTY CT SUITE L ROCKLEDGE, FL 32955 **New Mailing Address: Current Mailing Address:** 571 HAVERTY CT SUITE L ROCKLEDGE, FL 32955 US FEI Number: 59-3125472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SECOR, JENNIFER L PRES 571 HAVERTY COURT STE-L ROCKLEDGE, FL 32955 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete LUCERNONI, WAYNE JENNIFER, SECOR L PRES Name: Name: M/S R5-12A PO BOX 9800 Address: 571 HAVERTY COURT, SUITE L Address: City-St-Zip: MELBOURNE, FL 32902 City-St-Zip: ROCKLEDGE, FL 32955 US Title: Title: (X) Change () Addition () Delete ROSELLE, LARRY Name: ROSELLE, LARRY Name: Address: 700 SO BABCOCK STR. STE 201 Address: 5675 S. SYKES CREEK PKWY City-St-Zip: MELBOURNE, FL City-St-Zip: COCOA BEACH, FL 32931 Title: () Delete Title: () Change () Addition CUNIO, ROBERT Name: Name: MAIL CODE-SGS-2020 PO BOX 21237 Address: Address: City-St-Zip: KSC. FL 32815 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SANDERSON, LEONARD Name: Address: 9001 ELLIS ROAD Address: City-St-Zip: MELBOURNE, FL 32904 City-St-Zip: Title: () Delete Title: () Change () Addition DRAKE, JAMES Name: Name: 1519 CLEARLAKE ROAD Address: Address: City-St-Zip: COCOA, FL 32922 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: JENNIFER SECOR PRES 04/30/2007