## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001747

FILED May 13, 2008 Secretary of State

Entity Name: ST. MARKS EDUCATIONAL CENTER INC.			
Current Pi	rincipal Place of Business:	New Princ	ipal Place of Business:
	GE AVENUE RCE, FL 34950		
Current Mailing Address:		New Mailing Address:	
	GE AVENUE RCE, FL 34950		
FEI Number: 65-0440395 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:			
4700 JUÁN FORT PIEF	RCE, FL 34950 US  named entity submits this statement for the purpose of	of changing i	ts registered office or registered agent, or both,
SIGNATUR	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	T () Delete SWANSON, MIKE 1255 SW MAPLEWOOD DR PORT ST LUCIE, FL 34986	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition KINCY, HARRY 4700 JUANIT AVENUE FORT PIERCE, FL 34946
Title: Name: Address: City-St-Zip:	VCD () Delete ALSTON, KATIE 1502 N 23RD ST FT PIERCE, FL 34950	Title: Name: Address: City-St-Zip:	VCD (X) Change ( ) Addition PRESSLEY, GREG 779 KARRIGAN TER. FT PIERCE, FL 34983
Title: Name: Address: City-St-Zip:	SD () Delete BYRD-FARR, ETHEL 103 HILTON DR FT PIERCE, FL 34950	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition SMITH, CARL 921 ORANGA AVENUE FT PIERCE, FL 34950
Title: Name: Address: City-St-Zip:	D () Delete GREEN, RONNIE 1604 N 44TH STREET FT PIERCE, FL 34947	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MCPHEE, P.J. 2205 N. 45TH STREET FT PIERCE, FL 34946
Title: Name: Address: City-St-Zip:	PYD () Delete MCPHEE, P.J. 2205 N 45TH STREET FT PIERCE. FL 34946	Title: Name: Address: City-St-Zip:	PYD (X) Change ( ) Addition INGRAM, DONNA 1010 BURMUDA AVENUE FT PIERCE. FL 34950

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: P.J. MCPHEE 05/13/2008 D