

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 09, 2012
Secretary of State**

DOCUMENT# N96000002115

Entity Name: NEW DIRECTION INSTITUTE, INCORPORATED**Current Principal Place of Business:**6730 WEST COMMERCIAL BLVD.
LAUDERHILL, FL 33319 US**New Principal Place of Business:****Current Mailing Address:**6730 WEST COMMERCIAL BLVD.
LAUDERHILL, FL 33319 US**New Mailing Address:****FEI Number:** 65-0659008**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROOKS, GRACE DR
6730 WEST COMMERCIAL BLVD
LAUDERHILL, FL 33319 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: VP 1
Name: BROOKS, LEIGHTON MD
Address: 7111 NW 46 CT
City-St-Zip: LAUDERHILL, FL 33319

Title: VP 2
Name: HAMILTON, JAMES
Address: 5930 SABLE GLEN
City-St-Zip: COLLEGE PARK, GA 30349

Title: T
Name: BELL, HILDA
Address: 8701 WILES RD #308
City-St-Zip: CORAL SPRINGS, FL 33067

Title: C/S
Name: HYLTON, JENNIFER
Address: 5257 NW 29TH CT
City-St-Zip: MARGATE, FL 33063

Title: P
Name: BROOKS, GRACE DR
Address: 6730 WEST COMMERCIAL BLVD
City-St-Zip: LAUDERHILL, FL 33319

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: DR. GRACE BROOKS

P

07/09/2012

Electronic Signature of Signing Officer or Director

Date