

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006621

FILED
Apr 22, 2008
Secretary of State

Entity Name: PROFESSIONAL SPEAKERS NETWORK, INC.

Current Principal Place of Business:

15211 NW 33 COURT
MIAMI GARDENS, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9906
FT. LAUDERDALE, FL 33310 US

New Mailing Address:

FEI Number: 65-0713925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUPREE, MARTHENIA
15211 N.W. 33 COURT
MIAMI GARDENS, FL 33054 US

Name and Address of New Registered Agent:

DUPREE, MARTHENIA P DR
15211 N.W. 33 COURT
MIAMI GARDENS, FL 33054 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: DR. MARTHENIA DUPREE

04/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUPREE, MARTHENIA
Address: 15211 NW 33 COURT
City-St-Zip: MIAMI GARDENS, FL

Title: VP () Delete
Name: GREEN, W STEVEN
Address: 15932 SW 146 TERR
City-St-Zip: MIAMI, FL 33196

Title: S () Delete
Name: ROSS, TIFFANY
Address: 13 BROOKMIST DRIVE
City-St-Zip: COLUMBIA, SC 29225

Title: D () Delete
Name: RICKY, SMITH
Address: 15211 NW 33 COURT
City-St-Zip: MIAMI GARDENS, FL 33054

Title: D () Delete
Name: TAPPER, JULIA
Address: 6950 SW 26 ST
City-St-Zip: MIRAMAR, FL 33023

Title: T () Delete
Name: SMITH, LOUISE
Address: 3490 CHARLES AVE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GREEN, W STEVEN V DR
Address: 15932 SW 146 TERR
City-St-Zip: MIAMI, FL 33196

Title: S (X) Change () Addition
Name: ROSS, TIFFANY S DR
Address: 13 BROOKMIST DRIVE
City-St-Zip: COLUMBIA, SC 29225

Title: D (X) Change () Addition
Name: SMITH, RICKY D
Address: 15211 NW 33 COURT
City-St-Zip: MIAMI GARDENS, FL 33054

Title: D (X) Change () Addition
Name: LEMON, ROBERT D
Address: PO BOX 171802
City-St-Zip: MIAMI, FL 33017

Title: T (X) Change () Addition
Name: SMITH, LOUISE T D
Address: 3490 CHARLES AVE
City-St-Zip: MIAMI, FL 33133

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: DR. MARTHENIA DUPREE

P

04/22/2008

Electronic Signature of Signing Officer or Director

Date