

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000602

FILED
Jan 19, 2006
Secretary of State

Entity Name: THE ONE ROOM SCHOOL HOUSE PROJECT, INC.

Current Principal Place of Business:

4180 NE 15TH STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

4180 NE 15TH STREET
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3427156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERZIAN, SAVAN
2415 NW 38 CT
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

TERZIAN, SEVAN
2415 NW 38 CT
GAINESVILLE, FL 32605 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: SEVAN TERZIAN

01/19/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: TERZIAN, SAVAN
Address: 2415 NW 38 CT
City-St-Zip: GAINESVILLE, FL 32605

Title: D/S () Delete
Name: VALANTIS, CHERYL
Address: 2322 NE 11 TERRACE
City-St-Zip: GAINESVILLE, FL 32609

Title: D/T () Delete
Name: NEWMAN, ARTHUR
Address: 1802 N.W. 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D/VP () Delete
Name: RIOS, MELISSA
Address: 5314 SW 164TH ST.
City-St-Zip: ARCHER, FL 32618

Title: D (X) Delete
Name: MACON, DENISE
Address: 1600 NE 12 AVE/LOT 16
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: TERZIAN, SEVAN
Address: 2415 NW 38 CT
City-St-Zip: GAINESVILLE, FL 32605

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

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

Title: D/VP (X) Change () Addition
Name: NEWMAN, ARTHUR
Address: 1802 N.W. 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SEVAN TERZIAN

PRES

01/19/2006

Electronic Signature of Signing Officer or Director

Date