

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90040 030 ****61.25

DOCUMENT # N97000006326

1. Entity Name

EACH ONE TEACH ONE, INC.



Principal Place of Business

9968 -53RD AVE N
SAINT PETERSBURG FL 33708

Mailing Address

9968 -53RD AVE N
SAINT PETERSBURG FL 33708

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3478243

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TURLEY, DAVID K
~~10146 65TH AVE N~~
~~SEMINOLE FL 33772~~

9968 - 53RD AVE N,
ST. PETERSBURG, FL 33708

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: P ☐ Delete
NAME: TURLEY, DAVID K
STREET ADDRESS: 9968 53RD AVE N
CITY ST ZIP: SAINT PETERSBURG FL 33708

TITLE: VPD ☐ Delete
NAME: KITELYN, RONALD
STREET ADDRESS: 13921 86TH AVE N
CITY ST ZIP: SEMINOLE FL 33776

TITLE: D ☐ Delete
NAME: TURLEY, GLENDA
STREET ADDRESS: 9968 53RD AVE N
CITY ST ZIP: SAINT PETERSBURG FL 33708

TITLE: D ☐ Delete
NAME: SMYSE, ROGER
STREET ADDRESS: 250 SIESTA LN
CITY ST ZIP: LARGO FL 33770

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY ST ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY ST ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY ST ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY ST ZIP:

TITLE: ☐ Change ☐ Addition
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STREET ADDRESS:
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STREET ADDRESS:
CITY ST ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY ST ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/07

(727) 319-9673

ATTACHMENT

60005145
#N97000006326

Please note:

I signed block 8
only because I
changed the
address in
block 6

A handwritten signature, possibly reading "B. B.", consisting of two stylized, overlapping capital letters.