2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006384

Entity Name: 412 STUDENTS, INC.

FILED May 09, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3125 FORTUNE WAY 6175 HICKORY FLAT HWY

SUITE 110-340

WELLINGTON, FL 33414 WOODSTOCK, GA 30188

Current Mailing Address: New Mailing Address:

12645 TIMBER PINE TRAIL 6175 HICKORY FLAT HWY

WELLINGTON, FL 33414 US SUITE 110-340 WOODSTOCK, GA 30188

US

FEI Number: 65-0799464 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:

BROWER, DAVID W 12645 TIMBER PINE TRAIL WELLINGTON, FL 33414 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:

Title:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

CO-P (X) Change () Addition () Delete BROWER, DAVID W BROWER, DAVID W Name: Name: 12645 TIMBER PINE TRAIL Address: 703 BRADSHAW LAKE CT Address:

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WOODSTOCK, GA 30188 US

() Delete Title: (X) Change () Addition BROWER, SHAWNA Name: BROWER, SHAWNA Name: Address: 12645 TIMBER PINE TRAIL Address: 703 BRADSHAW LAKE CT City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WOODSTOCK, GA 30188 US

Title: CO-P () Delete Title: (X) Change () Addition LUKASZEWSKI, MICHAEL LUKASZEWSKI, MICHAEL Name: Name: Address:

1604 ARCADIA DRIVE SUITE 309 1729 LANCASTER DR Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: SPRINGDALE, AR 72762 US

Title: () Delete Title: (X) Change () Addition

Name: LUKASZEWSKI, JENNIE Name: LUKASZEWSKI, JENNIE 1729 LANCASTER DR Address: 1604 ARCADIA DRIVE SUITE 309 Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: SPRINGDALE, AR 72762 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID W. BROWER **PRES** 05/09/2005