## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000003423

Entity Name: A GIFT FOR TEACHING, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6501 MAGIO BLDG. 4000 ORLANDO,	WAY	US					
Current Mailing Address:				New Mailing Address:			
6501 MAGIO BLDG. 4000 ORLANDO,	3	US					
FEI Number:	59-3515162	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( )	Certificate of Status Desire	ed ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
LANDWIRTH, GARY 6501 MAGIC WAY BLDG. 400C ORLANDO, FL 32809 US				THOMPSON, JANE 6501 MAGIC WAY BLDG. 400C ORLANDO, FL 32809 US			
The above r in the State		submits this statement for the pu	irpose of	f changing its	s registered	office or registered agent,	or both,
SIGNATURE: JANE THOMPSON				04/20/2006			
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CAMPBELL, SC	AL STUDIOS PLAZA		Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BOWMAN, SCO	O SUMMIT BLVD		Title: Name: Address: City-St-Zip:	BOWMAN, SC	ND SUMMIT BLVD	
Title: Name: Address: City-St-Zip:	PARADIS, AMA	E AVE., STE 1800		Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( ) LANDWIRTH, G 2814 CORRINE ORLANDO, FL	DRIVE		Title: Name: Address: City-St-Zip:	VC (2 BRADY, SARA 2251 LUCIEN MAITLAND, FI	WAY	
Title: Name: Address: City-St-Zip:	VC () THIELHELM, Re 200 S. ORANGI ORLANDO, FL	E AVENUE		Title: Name: Address: City-St-Zip:	C (2 THIELHELM, I 200 S. ORANG ORLANDO, FL	GE AVENUE	
Title: Name: Address: City-St-Zip:	MUSE, DEBBIE 1303 BLACK W			Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	

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: DEBBIE MUSE S 04/20/2006