2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# N98000003859

Entity Name: CASPER LEARNING FM INCORPORATED

Current Principal Place of Business:

6910 N.W. 2ND TERRACE
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6910 N.W. 2ND TERRACE
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 61-1436115 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LACY, WILLIAM R
6910 N.W. 2ND TERRACE
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LACY, WILLIAM R
Address: 6910 NW 2ND TERRACE
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete
Name: LACY, DAN III
Address: 2110 GOLDCAMP RD.
City-St-Zip: COLORADO SPRINGS, CO 80906

Title: SD ( ) Delete
Name: BELCHER, JOHN A
Address: 6910 NW 2ND TERRACE
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: BELCHER, JOHN A
Address: 6910 NW 2ND TERRACE
City-St-Zip: BOCA RATON, FL 33487

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: WILLIAM R LACY PD 04/13/2005

Electronic Signature of Signing Officer or Director — Date