

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000006233

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** INSTITUTE OF ALTERNATIVE LEARNING INTERNATIONAL, INC.

**Current Principal Place of Business:**

1800 PEMBROKE DR  
#300  
ORLANDO, FL 32810 US

**New Principal Place of Business:**

750 THOMPSON AVENUE  
MAITLAND, FL 32751 US

**Current Mailing Address:**

1800 PEMBROKE DR  
#300  
ORLANDO, FL 32810 US

**New Mailing Address:**

750 THOMPSON AVENUE  
MAITLAND, FL 32751 US

**FEI Number:** 52-2176496      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FIMORE, AMY J P  
750 THOMPSON ROAD  
MAITLAND, FL 32751 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: PDS ( ) Delete  
Name: FILMORE, AMY J  
Address: 750 THOMPSON ROAD  
City-St-Zip: MAITLAND, FL 32751

Title: VTD ( ) Delete  
Name: FILMORE, LEROY SR  
Address: 750 THOMPSON ROAD  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify 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: AMY J. FILMORE

PDS

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date