

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006703

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** THE NET TRAINING INSTITUTE, INC.

**Current Principal Place of Business:**

720 N. ORANGE AVE.  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 536875  
ORLANDO, FL 32853 US

**New Mailing Address:**

P.O. BOX 536875  
ORLANDO, FL 328536875 US

**FEI Number:** 59-3545902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SCHWAGER, KAREN  
720 N. ORANGE AVE.  
ORLANDO, FL 32801 US

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

LACOUR, CHARLES  
720 N. ORANGE AVE.  
ORLANDO, FL 32801 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: CHARLES LACOUR

04/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: LACOUR, CHARLES  
Address: 720 N. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

Title: DST ( ) Delete  
Name: COX, JOHN W  
Address: 200 ST ANDREWS BLVD #1307  
City-St-Zip: WINTER PARK, FL 32792

Title: DVP ( ) Delete  
Name: MCNULTY, LESLIE  
Address: 120 FLAMINGO  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: D ( ) Delete  
Name: UNDERWOOD, JAMES  
Address: 15 TIMBERLAKE LN  
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete  
Name: SLEDD, TOM  
Address: 2408 CATTLEMEN DR  
City-St-Zip: BRANDON, FL 33612

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

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

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

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

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: CHARLES LACOUR

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date