

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001113

FILED
Apr 16, 2008
Secretary of State

Entity Name: STUDENTS TURN ADVERSITY INTO OPPORTUNITY, INC.

Current Principal Place of Business:

4444 N UNIVERSITY DRIVE
LAUDERHILL, FL 33351

New Principal Place of Business:

Current Mailing Address:

PO BOX 20655
FT LAUDERDALE, FL 33320

New Mailing Address:

PO BOX 25214
FT LAUDERDALE, FL 33320

FEI Number: 65-0933541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HENRY, DONNA C
5100 NW 64TH TERR
LAUDERHILL, FL 33319 US

Name and Address of New Registered Agent:

HENRY, DONNA C
5957 ABBEY RD
TAMARAC, FL 33321 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:

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: IMMOGENE, HENRY
Address: 4500 N. HIATUS ROAD
City-St-Zip: SUNRISE, FL 33351

Title: SD () Delete
Name: BUCHANAN, ELAINE BISHOP
Address: 4454 NW. 99TH TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: CD () Delete
Name: HEATHERLY, SARAH
Address: 2128 KAHIKI DRIVE
City-St-Zip: PLANTATION KEY, FL 33029

Title: MD (X) Delete
Name: BOOKER, RHODES
Address: 1020 NW 185TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: CD () Delete
Name: BUCHANAN, SAVIAN
Address: 4454 NW 99TH TERRACE
City-St-Zip: SUNRISE, FL 33351 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DONNA, HENRY PASTOR
Address: P.O. BOX 25214
City-St-Zip: TAMARAC, FL 33320

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

Title: CD (X) Change () Addition
Name: HEATHERLY-CRESS, SARAH
Address: 6713 WINTERSET GARDENS ROAD
City-St-Zip: WINTERHAVEN, FL 33884

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: DONNA C. HENRY

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date