

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002609

FILED
Feb 17, 2011
Secretary of State

Entity Name: SENIOR ADVENTURES IN LEARNING OF MELBOURNE, INC.

Current Principal Place of Business:

2950 N HARBOUR CITY BLVD
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

2950 N HARBOUR CITY BLVD
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3576282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEELER, BEVERLY M
3942 ORCHARD DRIVE
MELBOURNE, FL 32940 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: C
Name: JOHN, DRESKA
Address: 782 THRASHER DR
City-St-Zip: VIERA, FL 32955

Title: TR
Name: ESTES, CLAUDIA
Address: 1820 INDEPENDENCE
City-St-Zip: MELBOURNE, FL 32940

Title: TR
Name: JENNINGS, PHILLIP
Address: 695 NICKLAUS DR
City-St-Zip: MELBOURNE, FL 32940

Title: S/T
Name: MCCARTER, JAN
Address: 1549 CLOVER CIR
City-St-Zip: MELBOURNE, FL 32935

Title: TR
Name: MARGOLIS, RICHARD RABBI
Address: 5995 N WICKHAM ROAD
City-St-Zip: MELBOURNE, FL 32940

Title: TR
Name: OLIVIER, MICKEY
Address: 337 DEER LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32940

I hereby 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 all other like empowered.

SIGNATURE: BEVERLY M WHEELER

DIRE

02/17/2011

Electronic Signature of Signing Officer or Director

Date