

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005741

FILED  
Jan 18, 2005  
Secretary of State

Entity Name: HOME EDUCATION RESOURCES AND INFORMATION, INC.

**Current Principal Place of Business:**

400 CAHOON RD S  
JACKSONVILLE, FL 32220

**New Principal Place of Business:**

**Current Mailing Address:**

400 CAHOON RD S  
JACKSONVILLE, FL 32220

**New Mailing Address:**

FEI Number: 59-3626790

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EVANS, RONALD N  
8847 IVYMILL PLACE SOUTH  
JACKSONVILLE, FL 32244 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: P ( ) Delete  
Name: EVANS, ROANLD N  
Address: 8847 IVYMILL PLACE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete  
Name: EVANS, PRINCESS D  
Address: 8847 IVYMILL PLACE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32244

Title: D ( ) Delete  
Name: WEAVER, TERRI R  
Address: 7945 BURMA ROAD  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: MOCK, KRISTEN G  
Address: 7418 BURLINGAME DRIVE S.  
City-St-Zip: JACKSONVILLE, FL 32216

Title: T ( ) Delete  
Name: CARSWELL, BOBBY  
Address: 8471 CASSIE RD  
City-St-Zip: JACKSONVILLE, FL 32221

Title: S ( ) Delete  
Name: WEAVER, GARY B  
Address: 7945 BURMA RD  
City-St-Zip: JACKSONVILLE, FL 32221

**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:

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

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: BOBBY CARSWELL

T

01/18/2005

Electronic Signature of Signing Officer or Director

Date