

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100565

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: STUDENT SUCCESS INITIATIVES, INC.

## Current Principal Place of Business:

15726 SW 7TH PLACE  
SUNRISE, FL 33326

## New Principal Place of Business:

661 CAYUGA DRIVE  
WINTER SPRINGS, FL 32708

## Current Mailing Address:

15726 SW 7TH PLACE  
SUNRISE, FL 33326

## New Mailing Address:

661 CAYUGA DRIVE  
WINTER SPRINGS, FL 32708

FEI Number: 65-1049264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EHREN, BARBARA J  
15726 SW 7TH PLACE  
SUNRISE, FL 33326 US

## Name and Address of New Registered Agent:

EHREN, BARBARA J  
661 CAYUGA DRIVE  
WINTER SPRINGS, FL 32708 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:

01/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: EHREN, BARBARA J  
Address: 15726 SW 7TH PLACE  
City-St-Zip: SUNRISE, FL 33326

Title: STD ( ) Delete  
Name: EHREN, TOM C  
Address: 15726 SW 7TH PLACE  
City-St-Zip: SUNRISE, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: EHREN, BARBARA J  
Address: 661 CAYUGA DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: STD (X) Change ( ) Addition  
Name: EHREN, TOM C  
Address: 661 CAYUGA DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM C. EHREN

STD

01/09/2008

Electronic Signature of Signing Officer or Director

Date