


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000020912 1. Entity Name TEACHER TREKS, INC.	
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Principal Place of Business 2336 S. EST OCEAN BLVD., #326 STUART, FL 34996	Mailing Address 2336 S. EST OCEAN BLVD., #326 STUART, FL 34996
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04142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1147519	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BURGESS, JUDY 98 S. SEWALL'S POINT RD. STUART, FL 34996
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8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE <i>Judy Burgess</i> <small>Signature typed or printed name of registered agent and title if applicable.</small>	<i>Judy Burgess</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>	<i>April 10, 2008</i> <small>DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	000000900528 04/29/08-80033-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURGESS, JUDY 98 S. SEWALL'S POINT RD. STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUINN, THOMAS 98 S. SEWALL'S POINT RD. STUART, FL 34996
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Judy Burgess</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>Judy Burgess</i>	<i>4/10/08</i> <small>Date</small>	<i>561-2028059</i> <small>Daytime Phone #</small>
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