

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061739

FILED
Jan 11, 2007
Secretary of State

Entity Name: STILTMART LEARNING MANAGEMENT SYSTEMS, INC.

Current Principal Place of Business:

2617 TINOSA CIRCLE
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

2617 TINOSA CIRCLE
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 59-3731761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STILTNER, NELSON H
2617 TINOSA CIRCLE
PENSACOLA, FL 32526 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STILTNER, NELSON H
Address: 2617 TINOSA CIRCLE
City-St-Zip: PENSACOLA, FL 32526

Title: V () Delete
Name: MARTINEZ, JESS
Address: 10835 HIGHWAY 150
City-St-Zip: GREENVILLE, IN 47124

Title: V () Delete
Name: WEBB, MIKE
Address: 1944 CARDINAL LANE
City-St-Zip: NAVARRE, FL 32566

Title: S () Delete
Name: GOSSEEN, KIM
Address: 2407 CAVALLA LOOP
City-St-Zip: PENSACOLA, FL 32526

Title: T () Delete
Name: GOSSEEN, KIM
Address: 2407 CAVALLA LOOP
City-St-Zip: PENSACOLA, FL 32526

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: NELSON H. STILTNER

P

01/11/2007

Electronic Signature of Signing Officer or Director

Date