2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# P01000103983

Entity Name: PROFESSIONAL DEVELOPMENT SEMINARS, INC.

Current Principal Place of Business:

1020 SUNSHINE LANE, SUITE 104
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

8151 EMERALD FOREST CT
SANFORD, FL 32771

Current Mailing Address:

1020 SUNSHINE LANE, SUITE 104
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

8151 EMERALD FOREST CT
SANFORD, FL 32771

FEI Number: 30-0008896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, MAUREEN L
1020 SUNSHINE LANE, SUITE 104
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

SMITH, MAUREEN L
8151 EMERALD FOREST CT
SANFORD, FL 32771 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: 05/31/2005
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DCP ( ) Delete
Name: SMITH, MAUREEN L
Address: 1020 SUNSHINE LANE, SUITE 104
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change ( ) Addition
Name: SMITH, MAUREEN L
Address: 8151 EMERALD FOREST CT
City-St-Zip: SANFORD, FL 32771 US

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

SIGNATURE: MAUREEN SMITH PRES 05/31/2005
Electronic Signature of Signing Officer or Director — Date