

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115493

Entity Name: CLASSES4U, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1894 SE PIGGYBACK RD
ARCADIA, FL 34266

New Principal Place of Business:

1832 PEACH DR
ARCADIA, FL 34266

Current Mailing Address:

1894 SE PIGGYBACK RD
ARCADIA, FL 34266

New Mailing Address:

1832 PEACH DR
ARCADIA, FL 34266

FEI Number: 59-3760898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOULTON, KATHLEEN
1894 SE PIGGYBACK RD
ARCADIA, FL 34266 US

Name and Address of New Registered Agent:

MOULTON, KATHLEEN
1832 PEACH DR
ARCADIA, FL 34266 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:

05/01/2006

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: PST () Delete
Name: MOULTON, KATHLEEN
Address: 1894 SE PIGGYBACK RD
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: MOULTON, KATHLEEN
Address: 1832 PEACH DR
City-St-Zip: ARCADIA, FL 34266

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: KATHLEEN MOULTON

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date