

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048721

FILED  
Mar 29, 2010  
Secretary of State

**Entity Name:** FAMILY COMMUNICATIONS INSTITUTE, INC.

**Current Principal Place of Business:**

401 WEST COLONIAL DRIVE  
SUITE 5  
ORLANDO, FL 32804

**New Principal Place of Business:**

3900 EDGEWATER DRIVE  
ORLANDO, FL 328042835

**Current Mailing Address:**

POST OFFICE BOX 540021  
ORLANDO, FL 32854

**New Mailing Address:**

**FEI Number:** 01-0718872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KIMBALL, NEAL  
401 WEST COLONIAL DRIVE  
SUITE 5  
ORLANDO, FL 32804 US

**Name and Address of New Registered Agent:**

KIMBALL, NEAL  
3900 EDGEWATER DRIVE  
ORLANDO, FL 32804 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:

03/29/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KIMBALL, NEAL  
Address: POST OFFICE BOX 540021  
City-St-Zip: ORLANDO, FL 32854

Title: D  
Name: KIMBALL, JILL  
Address: POST OFFICE BOX 540021  
City-St-Zip: ORLANDO, FL 32854

I hereby 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 all other like empowered.

SIGNATURE: NEAL KIMBALL

D

03/29/2010

Electronic Signature of Signing Officer or Director

Date