## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000068643

1. Entity Name

CENTER FOR SHORT COURSES, INC.



Principal Place of Business

172 DEER LAKE CIR ORMOND BCH, FL 32174 Mailing Address

PO BOX 731403

ORMOND BCH, FL 32173-1403

## FILED Apr 10, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

03212007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

\_\_\_06-1650587\_\_\_

- Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOZNIAK, DANIEL F 172 DEER LAKE CIR ORMOND BCH, FL 32174

## DO NOT WRITE IN THIS SPACE

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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					
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			:
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOZNIAK, DANIEL F 172 DEER LAKE CIR ORMOND BCH, FL 32174				000000638858 04/19/07-80013-014 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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.					