

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000064600

Entity Name: THE TRAINING SPACE, INC.

FILED  
Apr 03, 2005  
Secretary of State

## Current Principal Place of Business:

200 KNUTH ROAD  
SUITE 228  
BOYNTON BEACH, FL 33436 US

## Current Mailing Address:

200 KNUTH ROAD  
SUITE 228  
BOYNTON BEACH, FL 33436 US

## New Principal Place of Business:

5241 BRISATA CIRCLE  
F  
BOYNTON BEACH, FL 33437 US

## New Mailing Address:

5241 BRISATA CIRCLE  
F  
BOYNTON BEACH, FL 33437 US

FEI Number: 14-1886775

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: D ( ) Delete  
Name: BLAKESLEE, SPENCER PH.D.  
Address: 5241 BRISATA CIRCLE, APT F  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition  
Name: BLAKESLEE, SPENCER PH.D.  
Address: 5241 BRISATA CIRCLE, APT F  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: DR. ( ) Change (X) Addition  
Name: BLAKESLEE, SPENCER PHD  
Address: 5241 BRISATA CIRCLE, APT F  
City-St-Zip: BOYNTON BEACH, FL 33437 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: SPENCER BLAKESLEE, PH.D.

DR

04/03/2005

Electronic Signature of Signing Officer or Director

Date