

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000070293

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** HELPING DEVELOP ENLISTED LEARNING, INC.

**Current Principal Place of Business:**

8617 E COLONIAL DR STE 1600  
ORLANDO, FL 32817

**New Principal Place of Business:**

555 FILLMORE AVE  
#102  
CAPE CANAVERAL, FL 329203158 US

**Current Mailing Address:**

8617 E COLONIAL DR STE 1600  
ORLANDO, FL 32817

**New Mailing Address:**

555 FILLMORE AVE  
#102  
CAPE CANAVERAL, FL 329203158 US

**FEI Number:** 20-0077475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAUDETTE, DAVID  
8617 E COLONIAL DR STE 1600  
ORLANDO, FL 32817 US

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

GAUDETTE, DAVID  
8622 SPRING CLUB CT  
ORLANDO, FL 32825 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:** DAVID GAUDETTE

04/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** HEATH, JOSEPH W JR  
**Address:** 555 FILLMORE AVE #102  
**City-St-Zip:** CAPE CANAVERAL, FL 329203158 US

**Title:** D  
**Name:** HEATH, LINDA  
**Address:** 555 FILLMORE AVE #102  
**City-St-Zip:** CAPE CANAVERAL, FL 329203158 US

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:** DAVID GAUDETTE

MGR

04/27/2011

Electronic Signature of Signing Officer or Director

Date