2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000147589

1. Entity Name

EDUCATIONAL SUCCESS CONSULTING, INC.



FILED Jan 10, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

3012 HAWK'S LANDING DRIVE TALLAHASSEE, FL 32309-7216

3012 HAWK'S LANDING DRIVE TALLAHASSEE, FL 32309-7216



01062005

No Chg-P

CR2E034 (10/03)

4. FEI Number 51-0491596

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, MICHAEL J 3012 HAWK'S LANDING DRIVE TALLAHASSEE, FL 32309-7216

OO NOT WRITE

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 Signature, typed or printed name of registered agent and title II applicable. (NOTE, Registered Agent signature required when reinstaling)				DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaigr Trust Fund Contrib		\$5.00 May Be Added to Fees		
10.	ÖFFICERS AND DIREC	TORS				
NAME STREET ADDRESS CITY-ST ZIP	CEO – HARRIS, MICHAEL J 3012 HAWK'S LANDING DRIVE TALLAHASSEE, FL 323097216					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO HARRIS, MICHAEL J 3012 HAWK'S LANDING DRIVE TALLAHASSEE, FL 323097216				U00000174746	
TITLE NAME					01/10/05-80021-025 150.00	
STREET ADDRESS CITY-ST-ZIP				() Bu	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					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 filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information						

The early that the information supplied with this mining does not quality for the exemption stated in Section 119.07(3)(i), Horida 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.

SIGNATURE

SIGNATURE AND THE BOTH PROPRIESTS AND STREET OR DIRECTOR

01-06-05

850 942 8049