

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000017890

FILED
Jun 13, 2008
Secretary of State

Entity Name: APPLIED BEHAVIORAL LEARNING EXPERIENCES, INC

Current Principal Place of Business:

2768 HIGH RIDGE DR
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

PO BOX 2112
LAKELAND, FL 33806

New Mailing Address:

FEI Number: 20-0663919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSMON, CHRISTOPHER D
4415 FLORIDA NATIONAL DR #210
LAKELAND, FL 33813 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OSMON, STACEY L
Address: 2768 HIGH RIDGE DR
City-St-Zip: LAKELAND, FL 33813

Title: VP () Delete
Name: SANGER, KEVIN
Address: 2780 VERANDAH VUE WAY
City-St-Zip: LAKELAND, FL 33812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: STACEY OSMON

P

06/13/2008

Electronic Signature of Signing Officer or Director

Date