2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P04000064651

Entity Name: NEW HORIZONS SUPPORTS & SERVICES INC.

Current Principal Place of Business:

3432 UPHILL TERRACE
JACKSONVILLE,, FL 32225

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 351592
JACKSONVILLE,, FL 32235

New Mailing Address:

FEI Number: 20-1079384 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLLARD, ZELLENE
1219 DYAL STREET
JACKSONVILLE,, FL 32206 US

Name and Address of New Registered Agent:

PRESHA, GERALDINE
1219 DYAL STREET
JACKSONVILLE,, FL 32206 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: GERALDINE PRESHA 04/29/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SEYMORE, MARICHAL B
Address: 3432 UPHILL TERRACE
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP (X) Delete
Name: POLLARD, ZELLENE
Address: 3432 UPHILL TERRACE
City-St-Zip: JACKSONVILLE,, FL 32225

Title: SEC. (X) Delete
Name: GOLDEN, SHANNON
Address: 3432 UPHILL TERRACE
City-St-Zip: JACKSONVILLE,, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARICHAL SEYMORE P 04/29/2008
Electronic Signature of Signing Officer or Director Date