

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005 8:00 am
Secretary of State

05-31-2005 90005 045 ***158.75

DOCUMENT # P04000070078



1. Entity Name
MTK LEARNING SOLUTIONS, INC.

Principal Place of Business
**605 CATNIP COURT
JACKSONVILLE, FL 32259**

Mailing Address
**605 CATNIP COURT
JACKSONVILLE, FL 32259**

2. Principal Place of Business
1083 BECKINGHAM DR.

3. Mailing Address
1083 BECKINGHAM DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01112005

Chg-P

CR2E034 (10/03)

City & State
ST AUGUSTINE, FL

City & State
ST AUGUSTINE, FL

4. FEI Number
20-1057550

Applied For
☐ Not Applicable

Zip
32092

Country
USA

Zip
32092

Country
USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VOSSMAN, DONNA M
605 CATNIP COURT
JACKSONVILLE, FL 32259**

7. Name and Address of New Registered Agent

Name
DONNA M. VOSSMAN

Street Address (P.O. Box Number is Not Acceptable)

1083 BECKINGHAM DR

City
ST AUGUSTINE FL Zip Code
32092

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]

(NOTE: Registered Agent signature required when reinstating)

4.27.05

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
VOSSMAN, DONNA M
605 CATNIP COURT
JACKSONVILLE, FL 32259** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CCO
VOSSMAN, RICHARD A
605 CATNIP COURT
JACKSONVILLE, FL 32259** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
VOSSMAN, DONNA M.
1083 BECKINGHAM DR
ST. AUGUSTINE, FL 32092** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CCO
VOSSMAN, RICHARD A.
1083 BECKINGHAM DR
ST AUGUSTINE, FL 32092** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 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]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.27.05

Date

904.866.1451

Daytime Phone #