

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091802

FILED
Jul 14, 2006
Secretary of State

Entity Name: EDUCATIONAL RESOURCE CONSULTANTS, INC.

Current Principal Place of Business:

7300 W. CAMINO REAL
SUITE 112
BOCA RATON, FL 33433

Current Mailing Address:

7300 W. CAMINO REAL
SUITE 112
BOCA RATON, FL 33433

New Principal Place of Business:

3840 W. HILLSBORO BVD.
SUITE 303
DEERFIELD BEACH, FL 33442

New Mailing Address:

3840 W. HILLSBORO BVD.
SUITE 303
DEERFIELD BEACH, FL 33442

FEI Number: 54-2153766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARD SAUBER/DORA CLAY CA
7300 W CAMINO REAL STE 112
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

DORA CASTANEDA
3840 W. HILLSBORO BVD.
SUITE 303
DEERFIELD BEACH, FL 33442 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: DORA CASTANEDA

07/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CASTANEDA, DORA E
Address: 7300 W. CAMINO REAL #112
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: SAUBER, RICHARD
Address: 7300 W. CAMINO REAL #112
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CASTANEDA, DORA E
Address: 3840 W. HILLSBORO BVD. (SUITE 303)
City-St-Zip: DEERFIELD BEACH, FL 33442

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DORA CASTANEDA

D

07/14/2006

Electronic Signature of Signing Officer or Director

Date