2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 29, 2005 8:00 am Secretary of State 07-13-2005 90020 020 ***150.00

DOCUMENT # P04000127032 1. Entity Name CUSTOMIZED CURRICULUM, INC.								07-13-2005	90020	0 020 ***	150.00	
Principal Place of Business Mailing Address 338 E LEMON STREET 338 E LEMON STREET TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34					34689		A I PROFITANTO	a pana girin 26kk brim arina				
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			06302005	Chg-P	CR2E	034 (10/03)		
City & State			•	City & State		4. FEI Numb 20	- -335781	18	<u>_</u>	plied For Applicable		
Zip	Country			Zip Coun		try	5. Certificate	of Status Desired		\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
CAMERON, CARRIE 338 E LEMON STREET TARPON SPRINGS, FL 34689						Street Address (P.O. Box Number is Not Acceptable)						
	\sim		_			City			FL	Zip Code	,	
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.												
7/1/2005											55	
SIGNATURE Constants, typeod or printed name of regelibred agent and title if applicable. (NOTE: Regulatered Agent signature required when rematating) DATE												
		l FEE IS \$19 ptember 7, 2		Election Campa Trust Fund Cont			i.00 May Be ded to Fees	In accordance wit corporation did no	th s. 607 of receiv	7.193(2)(b), l ve the prior r	F.S., the lotice,	
10.	Leon	OFFIC	ERS AND DIREC		11.		ADDITIONS	CHANGES TO OFFIC	ERS AN			
TITLE NAME	COO Deins					ŧ				☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP						ET ADORESS -ST-ZIP						
TITLE	CSO CSO			☐ Oeleta	£ .				Change	Addition		
NAME STREET ADDRESS	BROWN, THOMAS				E ET ADORESS							
CITY-SI-ZIP	338 E LEMON STREET TARPON SPRINGS, FL 34689					-ST-73P					1	
TITLE	CEO CAMERON, CARRIE			☐ Delete	i 				Change	☐ Addition		
STREET ADDRESS					STRE	ET ADDRESS					ļ	
CITY-SI-ZIP	P TARPON SPRINGS, FL 34689					- \$1 - ZLP				Change	- Addition	
HAME					NAN	E		· · · · · · · · · · · · · · · · · · ·	·	I i Canifold	Artillen	
STREET ADDRESS CITY-ST-ZIP	•					ET ADORESS -ST-ZIP						
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CITY-SI-ZIP					-	-ST-ZIP						
TITLE NAME				☐ Delete	TITL:	·				Change	Addition	
STREET ADDRESS				•		ET ADDRESS					· ·	
12. Liberativ	certify that It	e istormation we	oplied with this f	linghdoes not qualify to	_1	-51-ZIP -motion stated in S	ection 119 07/3\	(i). Florida Statutes 1 fo	urther cer	tlify that the In	formation	
12. I hereby certify that the information supplied with this filter 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 receivenor trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNAT	TURE:	577477874	مير	ame	لكل	<u>ر</u>	`	7/4/20	5	<u> </u>	88	