

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141972

FILED
Mar 29, 2009
Secretary of State

Entity Name: ACADEMIC AND LEARNING ASSESSMENT AND CONSULTATION SERVICES, INC.

Current Principal Place of Business:

7022 DOREEN STREET
TEMPLE TERRACE, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

7022 DOREEN STREET
TEMPLE TERRACE, FL 33617 US

New Mailing Address:

FEI Number: 20-1742774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRECKER, ALICIA P
7022 DOREEN STREET
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

FRECKER, ALICIA P PRESIDE
7022 DOREEN STREET
TEMPLE TERRACE, FL 33617 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: ALICIA PAIGE FRECKER

03/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRECKER, ALICIA P
Address: 7022 DOREEN STREET
City-St-Zip: TEMPLE TERRACE, FL 33617 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALICIA PAIGE FRECKER

PRES

03/29/2009

Electronic Signature of Signing Officer or Director

Date