

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011268

FILED
Jan 09, 2012
Secretary of State

Entity Name: EXAM COORDINATORS NETWORK, INC.

Current Principal Place of Business:

123 NW13TH ST
207
BOCA RATON, FL 33432

New Principal Place of Business:

6111 BROKEN SOUND PARKWAY NW
207
BOCA RATON, FL 33487

Current Mailing Address:

123 NW13TH ST
207
BOCA RATON, FL 33432

New Mailing Address:

6111 BROKEN SOUND PARKWAY NW
207
BOCA RATON, FL 33487

FEI Number: 20-2946487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, STEVEN
123 NW 13TH ST
207
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

LEVINE, STEVEN
6111 BROKEN SOUND PARKWAY NW
207
BOCA RATON, FL 33487 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:

01/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR
Name: LEVINE, STEVEN
Address: 6111 BROKEN SOUND PKWY
City-St-Zip: BOCA RATON, FL 33487

Title: DIR
Name: LEVINE, BARBARA
Address: 6111 BROKEN SOUND PKWY
City-St-Zip: BOCA RATON, FL 33487

Title: DIR
Name: STOPEK, RICHARD
Address: 6111 BROKEN SOUND PKWY
City-St-Zip: BOCA RATON, FL 33487

I hereby 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 all other like empowered.

SIGNATURE: STEVEN LEVINE

DIR

01/09/2012

Electronic Signature of Signing Officer or Director

Date