2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106095

Apr 19, 2011 Secretary of State

Entity Name: GIFTS, SPEECH, LANGUAGE & READING SPECIALISTS, INC.

New Principal Place of Business: Current Principal Place of Business: 419 NE 36TH AVENUE OCALA, FL 34470 **Current Mailing Address: New Mailing Address:** 419 NE 36TH AVENUE OCALA, FL 34470 FEI Number: 20-3245576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OWEN, ANDREA L 419 NE 36TH AVENUE OCALA, FL 34470 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:**

Title:

OWEN, ANDREA L Name: 419 NE 36TH AVENUE Address: City-St-Zip: OCALA, FL 34470

Title: VΡ

Name: TOMPKINS, JENNIFER E Address: 419 NE 36TH AVENUE OCALA, FL 34470 City-St-Zip:

Title: S. T

JONES, CAREY V Name: 419 NE 36TH AVENUE Address: City-St-Zip: OCALA, FL 34470

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: CAREY V. JONES S,T 04/19/2011