

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000119641

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** DISCOVERY INSTITUTE, P.A.

**Current Principal Place of Business:**

845 EXECUTIVE LANE  
SUITE 100  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560875  
ROCKLEDGE, FL 32956

**New Mailing Address:**

**FEI Number:** 20-3227479

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PORTER-RICHARD, PHD, CONNIE  
7058 RED BAY CT.  
VIERA, FL 32940 US

**Name and Address of New Registered Agent:**

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: P  
Name: PORTER-RICHARD, CONNIE  
Address: 7058 RED BAY CT  
City-St-Zip: MELBOURNE, FL 32940

Title: VP  
Name: RICHARD, FRANCIS  
Address: 7058 RED BAY CT  
City-St-Zip: MELBOURNE, FL 32940

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: CONNIE PORTER-RICHARD

PRES

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date