

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000066546

FILED
Mar 07, 2007
Secretary of State

Entity Name: EDUCATORS MANAGEMENT GROUP, INC.

Current Principal Place of Business:

5442 SUNSEEKER BLVD.
GREEN ACRES, FL 33463

New Principal Place of Business:

1283 UNITED DRIVE
MELBOURNE, FL 32934

Current Mailing Address:

5442 SUNSEEKER BLVD.
GREEN ACRES, FL 33463

New Mailing Address:

1283 UNITED DRIVE
MELBOURNE, FL 32934

FEI Number: 20-4860264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPLAN, JAMES F
4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLATZ, CHRISTOPHER T
Address: 5442 SUNSEEKER BLVD.
City-St-Zip: GREENACRES, FL 33463

Title: T () Delete
Name: GLATZ, CHRISTOPHER T
Address: 5442 SUNSEEKER BLVD.
City-St-Zip: GREENACRES, FL 33463

Title: VP () Delete
Name: GLATZ, MADONNA M
Address: 5442 SUNSEEKER BLVD.
City-St-Zip: GREENACRES, FL 33463

Title: S () Delete
Name: GLATZ, MADONNA M
Address: 5442 SUNSEEKER BLVD.
City-St-Zip: GREENACRES, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLATZ, CHRISTOPHER T
Address: 1283 UNITED DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: T (X) Change () Addition
Name: GLATZ, CHRISTOPHER T
Address: 1283 UNITED DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: VP (X) Change () Addition
Name: GLATZ, MADONNA M
Address: 1283 UNITED DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: S (X) Change () Addition
Name: GLATZ, MADONNA M
Address: 1283 UNITED DRIVE
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER T. GLATZ

P

03/07/2007

Electronic Signature of Signing Officer or Director

Date