2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000071890

FILED Apr 30, 2008 Secretary of State

Entity Name: CENTER FOR ORGANIZATION AND RELATIONAL EXCELLENCE, INC.

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|---|--|---|--|
| | ERVIEW DRIV W, FL 33578 | E US | | |
| urrent N | lailing Addres | s: | New Mailing Addres | ss: |
| | ERVIEW DRIV W, FL 33578 | E US | | |
| El Number | : 20-4972116 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| ame and | I Address of C | urrent Registered Agent: | Name and Address | of New Registered Agent: |
| 0616 RIV | R, KAREN M ERVIEW DRIV W, FL 33578 | E US | | |
| V LIVVIL | , | | | |
| ne above | · | submits this statement for the | purpose of changing its registere | ed office or registered agent, or both |
| ne above the State | named entity s e of Florida. RE: | | | |
| ne above the State GNATUI | e named entity s e of Florida. RE: Electron | ic Signature of Registered Ag | | ed office or registered agent, or both, Date |
| ne above the State GNATUI | e named entity s e of Florida. RE: Electron | ic Signature of Registered Ag | ent | ed office or registered agent, or both, Date ES TO OFFICERS AND DIRECTOR |
| ne above the State GNATUI ection Car | e named entity see of Florida. RE: Electron mpaign Financing S AND DIRECT | ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete VID OOP | ent | Date |
| ne above the State GNATUI ection Care FICER: ne: me: dress: | e named entity se of Florida. RE: Electron mpaign Financing S AND DIRECT D () SPEICHER, DAY 11015 SCOTT L RIVERVIEW, FL | ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete JID OOP 33569 US Delete REN OOP | ent ADDITIONS/CHANG Title: Name: Address: | Date ES TO OFFICERS AND DIRECTO |

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: KAREN M. SPEICHER VP 04/30/2008