

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000019134

Entity Name: IMPLANT EDUCATORS INC

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1968 WATER RIDGE DRIVE  
WESTON, FL 33326

## **New Principal Place of Business:**

4745 SW 148TH AVE SUITE #302  
DAVIE, FL 33330

## **Current Mailing Address:**

1968 WATER RIDGE DRIVE  
WESTON, FL 33326

## **New Mailing Address:**

FEI Number: 20-8479757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FERGUSON, KATHERINE A  
1968 WATER RIDGE DRIVE  
WESTON, FL 33326 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  
Name: FERGUSON, KATHERINE A  
Address: 1968 WATER RIDGE DRIVE  
City-St-Zip: WESTON, FL 33326

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: KATHERINE FERGUSON

P

01/08/2010

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

\_\_\_\_\_  
Date