

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000026915

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** TYLER ROBINSON SCHOOL SERVICES, INC.

**Current Principal Place of Business:**

794 FOXRIDGE CENTER DRIVE  
SUITE 100  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

794 FOXRIDGE CENTER DRIVE  
SUITE 102  
ORANGE PARK, FL 32065

**Current Mailing Address:**

794 FOXRIDGE CENTER DRIVE  
SUITE 100  
ORANGE PARK, FL 32065

**New Mailing Address:**

794 FOXRIDGE CENTER DRIVE  
SUITE 102  
ORANGE PARK, FL 32065

**FEI Number:** 26-4026744

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBINSON, TYLER  
794 FOXRIDGE CENTER DRIVE  
SUITE 100  
ORANGE PARK, FL 32065 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: ROBINSON, TYLER  
Address: 794 FOXRIDGE CENTER DRIVE SUITE 102  
City-St-Zip: ORANGE PARK, FL 32065

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:** J. TYLER ROBINSON

MR.

02/18/2010

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

\_\_\_\_\_  
Date