## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027359

Entity Name: PROFESSIONAL MEDICAL EDUCATION, INC.

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9563 SEDGWOOD DRIVE 9563 SEDGEWOOD DRIVE LAKE WORTH, FL 33467 US LAKE WORTH, FL 33467 US

Current Mailing Address: New Mailing Address:

9563 SEDGWOOD DRIVE US 9563 SEDGEWOOD DRIVE LAKE WORTH, FL 33426 US LAKE WORTH, FL 33467 US

FEI Number: 65-0758282 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

YOUNG, TED
9563 SEDGWOOD DRIVE
LAKE WORTH, FL 33467 US
YOUNG, TED
9563 SEDGEWOOD DRIVE
LAKE WORTH, FL 33467 US

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: TED YOUNG 01/05/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: CEO (X) Change ( ) Addition

 Name:
 YOUNG, TED
 Name:
 YOUNG, TED E CEO

 Address:
 9563 SEDGWOOD DRIVE
 Address:
 9563 SEDGEWOOD DRIVE

 City-St-Zip:
 LAKE WORTH, FL 33467
 City-St-Zip:
 LAKE WORTH, FL 33467

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: TED YOUNG CEO 01/05/2007