2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023990

Entity Name: PARADOX LEARNING SYSTEMS, INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
5001 E. FOWLER AVENUE SUITE L TAMPA, FL 33617 US			PO BOX 547426 ORLANDO, FL 32854	US	
Current M	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
5001 E. FOWLER AVENUE SUITE L TAMPA, FL 33617 US			PO BOX 547426 ORLANDO, FL 32854	US	
FEI Number:	: 59-3512089	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:		
4221 W. B TAMPA, F	ATE CENTER OY SCOUT B L 336075736				
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	Electro	nic Signature of Registered Aggreen of Control of the control of t	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VANDEVENTE 101 87TH AVE) Delete R, STEPHANIE S . NORTH JRG, FL 33702	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	BOOTH, JACK	ORLANDO PARKWAY	Title: (Name: Address: City-St-Zip:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACKIE L. BOOTH PRES 01/05/2005