

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004394

Entity Name: BRAIN EXPANSIONS SCHOLASTIC TRAINING, INC.

Current Principal Place of Business:

10006 CROSS CREEK BLVD
#406
TAMPA, FL 33647

Current Mailing Address:

10006 CROSS CREEK BLVD
#406
TAMPA, FL 33647

FEI Number: 20-2834380

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TAYLOR, JR, ROBERT EESQ.
LAW OFFICES OF R.E. TAYLOR, P.A.
609 W. AZEELE ST., STE. B
TAMPA, FL 33606 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name FREDERICK, DEXTER DR.
Address 10006 CROSS CREEK BLVD
City-State-Zip: TAMPA FL 33647

Title SEC
Name MATHIAS, CHRISTINA
Address 17716 CRYSTAL COVE PLACE
City-State-Zip: LUTZ FL 33548

Title OFFI
Name BLAND, TONY
Address 20429 WALNUT GROVE LANE
City-State-Zip: TAMPA FL 33647

Title VP
Name CATHCART, JOHN
Address 3236 SAN JOSE STREET
City-State-Zip: CLEARWATER FL 33759

Title CHAIRMAN
Name SWAGGER, PHILDRA JDR.
Address 1004 ENGLISH BLUFFS COURT
City-State-Zip: TAMPA FL 33508

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEXTER M. FREDERICK, MD

CEO

04/01/2015

Electronic Signature of Signing Officer/Director Detail

Date