

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000004292

**Entity Name:** FUTURE PROBLEM SOLVING PROGRAM INTERNATIONAL,  
INC.**FILED**  
**Jan 22, 2015**  
**Secretary of State**  
**CC4836653178****Current Principal Place of Business:**2015 GRANT PLACE  
MELBOURNE, FL 32901**Current Mailing Address:**2015 GRANT PLACE  
MELBOURNE, FL 32901 US**FEI Number: 42-1234706****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SOLOMON, MARIANNE  
205 S ROBERT WAY  
SATELLITE BEACH, FL 32937 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 PAST PRESIDENT  
Name BARLOW, MARTHA  
Address 1101 DOVER COURT  
City-State-Zip: WAUNAKEE WI 53597Title PRESIDENT  
Name HEPNER, SARA  
Address PO BOX 503  
City-State-Zip: SOLDOTNA AK 99669Title SECRETARY  
Name DARNELL, BRENDA  
Address 113 CONSUMER LANE  
City-State-Zip: FRANKFORT KY 40601Title EXECUTIVE DIRECTOR  
Name SOLOMON, MARIANNE  
Address 205 S ROBERT WAY  
City-State-Zip: SATELLITE BEACH FL 32937Title PRESIDENT ELECT  
Name FITE, JANET  
Address 202 SOUTH 14TH STREET  
City-State-Zip: SAVANNAH MO 64485

*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: MARIANNE SOLOMON****EXECUTIVE DIRECTOR****01/22/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date