

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001286

FILED  
May 05, 2005  
Secretary of State

Entity Name: ILLIANA EDUCATIONAL PRODUCTS INC.

**Current Principal Place of Business:**

10404 SWIFTSAIL LANE  
INDIANAPOLIS, IN 46256

**New Principal Place of Business:**

**Current Mailing Address:**

10404 SWIFTSAIL LANE  
INDIANAPOLIS, IN 46256

**New Mailing Address:**

FEI Number: 35-1968802      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GARCIA, JULIE  
1929 LAKE FOREST LANE  
ORANGE PARK, FL 32003      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: MASON, MEREDITH M  
Address: 10404 SWIFTSAIL LANE  
City-St-Zip: INDIANAPOLIS, IN 46256

Title: VPST      ( ) Delete  
Name: MASON, THOMAS E  
Address: 10404 SWIFTSAIL LANE  
City-St-Zip: INDIANAPOLIS, IN 46256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MEREDITH M. MASON

PRES

05/05/2005

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

\_\_\_\_\_ Date