

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001286

**FILED**  
**Mar 14, 2011**  
**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 M  
1870-C GREEN SPRINGS CIRCLE  
ORANGE PARK, FL 32003 US

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

WATLING, JULIE M  
1870-C GREEN SPRINGS CIRCLE  
ORANGE PARK, FL 32003 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: JULIE M. WATLING

03/14/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

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

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

SIGNATURE: MEREDITH M. MASON

PRES

03/14/2011

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

\_\_\_\_\_  
Date