

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003581

FILED  
Jan 27, 2010  
Secretary of State

**Entity Name:** TRUE BREAD ACADEMY, INC.

**Current Principal Place of Business:**

9650 PINES BLVD  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 848142  
HOLLYWOOD, FL 33084

**New Mailing Address:**

**FEI Number:** 65-1069412

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRANKER, CARLTON  
P. O. BOX 848142  
HOLLYWOOD, FL 33024 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BRANKER, VICTORIA  
Address: 1271 NW 137TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VD  
Name: BRANKER, CARL  
Address: 1271 NW 137TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SECT  
Name: FISHER, CINDY  
Address: 2299 NW 77 WAY, # 106  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TRES  
Name: MARCANO-HOLDER, MERLIN  
Address: 90 NE 152  
City-St-Zip: MIAMI, FL 33162

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: CARLTON BRANKER

MR

01/27/2010

Electronic Signature of Signing Officer or Director

Date