

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158720

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: COZMO THE SCHOOL, INC.

**Current Principal Place of Business:**

10347 BONITA BEACH RD.  
UNIT 103  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

10347 BONITA BEACH RD.  
UNIT 103  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

FEI Number: 20-1926909      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ADAMCZYK, MARK ESQ  
8950 FONTANA DEL SOL WAY, SUITE 100  
NAPLES, FL 34109 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: PD  
Name: ADAMCZYK, KYLE  
Address: 7935 AIRPORT PULLING RD. N. STE. 8  
City-St-Zip: NAPLES, FL 34109

Title: VD  
Name: ADAMCZYK, JOHN M  
Address: 7935 AIRPORT PULLING RD. N. STE. 8  
City-St-Zip: NAPLES, FL 34109

Title: VD  
Name: ADAMCZYK, PAMELA J  
Address: 4213 SNOWBERRY LANE  
City-St-Zip: NAPLES, FL 34119

Title: VD  
Name: ADAMCZYK, MARK E  
Address: 4213 SNOWBERRY LANE  
City-St-Zip: NAPLES, FL 34119

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: JOHN M. ADAMCZYK

VD

04/27/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date