

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705463

**Entity Name:** CAPSTONE ADAPTIVE LEARNING AND THERAPY CENTERS, INC.**FILED**  
**Jan 26, 2016**  
**Secretary of State**  
**CC4280973774****Current Principal Place of Business:**2912 NORTH E ST.  
PENSACOLA, FL 32501**Current Mailing Address:**2912 NORTH E ST.  
PENSACOLA, FL 32501**FEI Number: 59-0737912****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WHITE, SHERRY A.  
2912 NORTH E STREET  
PENSACOLA, FL 32501 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 OFFICER  
Name BRICKER, A. RANDY  
Address 2912 NORTH E STREET  
City-State-Zip: PENSACOLA FL 32501Title OFFICER  
Name BELL, BRIAN  
Address 2912 NORTH E ST.  
City-State-Zip: PENSACOLA FL 32501Title OFFICER  
Name STEAD, JON  
Address 2912 NORTH E STREET  
City-State-Zip: PENSACOLA FL 32501Title PRESIDENT  
Name WHITE, SHERRY A  
Address 2912 NORTH E STREET  
City-State-Zip: PENSACOLA FL 32501Title TREASURER  
Name HUGGINS, BRAD  
Address 2912 NORTH E ST.  
City-State-Zip: PENSACOLA FL 32501Title CHAIRMAN  
Name SMITH, NORMAN D  
Address 2912 NORTH E STEET  
City-State-Zip: PENSACOLA FL 32301Title VC  
Name ANDERSON, LARRY  
Address 2912 NORTH E ST.  
City-State-Zip: PENSACOLA FL 32501Title SECRETARY  
Name HAMILTON, SHERI K.  
Address 2912 NORTH E ST.  
City-State-Zip: PENSACOLA FL 32501

*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: SHERRY A WHITE****PRESIDENT****01/26/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date