

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008006

Entity Name: THE ARTS ACADEMY OF SOUTHWEST FLORIDA, INC.**Current Principal Place of Business:**3228 PURPLE MARTIN DR. UNIT 112
PUNTA GORDA, FL 33950**Current Mailing Address:**3228 PURPLE MARTIN DR. UNIT 112
PUNTA GORDA, FL 33950**FEI Number: 36-4740581****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**RUSSELL, W. KEVIN
14295 S TAMiami TRL
NORTH PORT, FL 34287 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	D
Name	TEMPLE, CHERYL A
Address	3228 PURPLE MARTIN DR UNIT 112
City-State-Zip:	PUNTA GORDA FL 33950

Title	D
Name	TADALON, LOURDES DR
Address	605 CORONADO DR
City-State-Zip:	PUNTA GORDA FL 33950

Title	D
Name	ASPERILLA, MARK OMD
Address	4040 LEA MARIE ISLAND DR
City-State-Zip:	PORT CHARLOTTE FL 33952

Title	TREASURER
Name	SORAH, DARA B
Address	1435 COLLINGSWOOD BLVD SUITE G
City-State-Zip:	PORT CHARLOTTE FL 33948

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: CHERYL A TEMPLE**DIRECTOR****01/31/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date