2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# 766255

Entity Name: ACADEMY OF CONSTRUCTION TECHNOLOGIES, INC.

Current Principal Place of Business:

2900 WEST OAK RIDGE ROAD
BLDG. 1600 ROOM 139
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 592744
ORLANDO, FL 32859 US

New Mailing Address:

FEI Number: 59-2245953 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SASSO, MICHAEL C
1031 WEST MORSE BLVD.
WINTER PARK, FL 32789 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: T ( ) Delete
Name: VAUGHN, ROBERT
Address: 875 JACKSON AVE
City-St-Zip: WINTER PARK, FL 32789

Title: PC ( ) Delete
Name: KANIA, GEORGE
Address: 430 WEST DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: CT ( ) Delete
Name: CORRADO, KEVIN
Address: 221 CIRCLE DRIVE
City-St-Zip: MAITLAND, FL 32751

Title: ST ( ) Delete
Name: FUGATE, JAMIE
Address: 2900 WEST OAK RIDGE ROAD BLDG 1600
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PC (X) Change ( ) Addition
Name: CORRADO, KEVIN
Address: 221 CIRCLE DRIVE
City-St-Zip: MAITLAND, FL 32751

Title: CT (X) Change ( ) Addition
Name: BLAIR, JR
Address: 430 WEST DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY MERCED ED 03/16/2009

Electronic Signature of Signing Officer or Director — Date