2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED Mar 11, 2009 Secretary of State

Entity Name: ACADEMIA BARBARA ANN ROESSLER, INC.

Current Principal Place of Business: New Principal Place of Business: 260 WILSHIRE BLVD 6951 LAND O LAKES BLVD CASSELBERRY, FL 32707 LAND O LAKES, FL 34639 **Current Mailing Address: New Mailing Address:** 260 WILSHIRE BLVD 6951 LAND O LAKES BLVD CASSELBERRY, FL 32707 LAND O LAKES, FL 34639 FEI Number: 66-0493222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RIVERA, ERNESTO J PRES. RIVERA, ERNESTO J PRES 3016 JUNEBERRY TERR 19113 LÔNE CREEK COURT OVIEDO, FL 32766 LAND O LAKES, FL 34639 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: ERNESTO RIVERA 03/11/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete RIVERA-VEGA, ERNESTO J RIVERA-VEGA, ERNESTO J Name: Name: 260 WILSHIRE BLVD. Address: 19113 LONE CREEK COURT Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: LAND O LAKES, FL 34639 Title: VCT Title: () Delete () Change () Addition RIVERA BADILLO, FRANKLIN Name: Name: Address: **RUCICON STREET #111** Address: City-St-Zip: EL PARAISO, SAN JUAN PUERTO, City-St-Zip: Title: () Delete Title: () Change () Addition VEGA ORSINI, ROSA Name: Name: CALLE TAMESIS 1521 URB. EL PARAISO Address: Address: City-St-Zip: RIO PIEDRAS, PUERTO RICO, 00926 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RIVERA MENDEZ, MARIO E Name: CALLE TAMESIS 1521 URB. EL PARAISO Address: Address: City-St-Zip: RIO PIEDRAS, PUERTO RICO, 00926 City-St-Zip: Title: Title: () Delete () Change () Addition TORO DE TRICOLI, NILMA Name: Name: CALLE GANGES URB EL PARAISO RIO PIEDRAS Address: Address: City-St-Zip: PUERTO RICO, 00926 City-St-Zip: Title: () Delete Title: () Change () Addition SANTIAGO, MANUEL Name: Name: Address: **URB LAS GAVIOTAS E-9** Address:

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.

City-St-Zip:

SIGNATURE: ERNESTO RIVERA-VEGA CP 03/11/2009

TOA BAJA PUERTO RICO, 00949

City-St-Zip: