

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001255

FILED
Apr 08, 2004
Secretary of State

Entity Name: FOUNTAIN PARK ACADEMY, INC.

Current Principal Place of Business:

595-C OLD NORCROSS ROAD
LAWRENCEVILLE, GA 30045

New Principal Place of Business:

5885 CUMMING HWY.
108-337
SUGAR HILL, GA 30518

Current Mailing Address:

595-C OLD NORCROSS ROAD
LAWRENCEVILLE, GA 30045

New Mailing Address:

5885 CUMMING HWY.
108-337
SUGAR HILL, GA 30518

FEI Number: 04-3734826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, ANN
13413 BRISTLECONE CIRCLE
ORLANOD, FL 32828 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: WARDLAW, TANYA
Address: 595-C OLD NORCROSS ROAD
City-St-Zip: LAWRENCEVILLE, GA 30045

Title: VCPS () Delete
Name: AUTRY, VOLESTA
Address: 595-C OLD NORCROSS ROAD
City-St-Zip: LAWRENCEVILLE, GA 30045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: WARDLAW, TANYA
Address: 5885 CUMMINGHWY., #108-337
City-St-Zip: SUGAR HILL, GA 30518

Title: VP (X) Change () Addition
Name: AUTRY, VOLESTA
Address: 5885 CUMMINGHWY., #108-337
City-St-Zip: SUGAR HILL, GA 30518

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VOLESTA AUTRY

VP

04/08/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date