

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002879

FILED  
Mar 18, 2004  
Secretary of State

Entity Name: CONNECTIONS ACADEMY, INC.

## Current Principal Place of Business:

1000 LANCASTER ST.  
BALTIMORE, MD 21202

## New Principal Place of Business:

1000 LANCASTER ST.  
6TH FLOOR  
BALTIMORE, MD 21202

## Current Mailing Address:

1000 LANCASTER ST.  
BALTIMORE, MD 21202

## New Mailing Address:

1000 LANCASTER ST.  
6TH FLOOR  
BALTIMORE, MD 21202

FEI Number: 68-0519943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.  
1333 N DUVAL ST  
TALLAHASSEE, FL 32303 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: DPT ( ) Delete  
Name: DREYER, BARBARA  
Address: 1000 LANCASTER ST.  
City-St-Zip: BALTIMORE, MD 21202

Title: C ( ) Delete  
Name: HOEHN-SARIC, R. CHRISTOPHER  
Address: 1001 FLEET ST., 9TH FLOOR  
City-St-Zip: BALTIMORE, MD 21202

Title: DS ( ) Delete  
Name: DANIELS, TIMOTHY  
Address: 1001 FLEET ST., 9TH FLOOR  
City-St-Zip: BALTIMORE, MD 21202

Title: VP ( ) Delete  
Name: GUERASSIO, MARC  
Address: 1000 LANCASTER ST.  
City-St-Zip: BALTIMORE, MD 21202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: DREYER, BARBARA  
Address: 1000 LANCASTER ST.  
City-St-Zip: BALTIMORE, MD 21202

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

Title: D (X) Change ( ) Addition  
Name: PETER, COHEN  
Address: 1001 FLEET ST., 9TH FLOOR  
City-St-Zip: BALTIMORE, MD 21202

Title: DTS (X) Change ( ) Addition  
Name: KEVIN, SHAFFER  
Address: 1001 FLEET ST., 9TH FLOOR  
City-St-Zip: BALTIMORE, MD 21202

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: BARBARA DREYER

DP

03/18/2004

Electronic Signature of Signing Officer or Director

Date