

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005173

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** COLOURS SCHOOL OF THE ARTS OF SOUTH WEST FLORIDA INC.

**Current Principal Place of Business:**

1706 14TH STREET E  
LEHIGH ACRES, FL 33972 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 758  
LEHIGH ACRES, FL 33970 US

**New Mailing Address:**

**FEI Number:** 65-1091166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILL, SHARON I  
1706 14TH STREET E  
LEHIGH ACRES, FL 33972 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: ED  
Name: HILL, SHARON I  
Address: 1706 14TH STREET E  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: PD  
Name: HOUSE, JACQUELINE  
Address: 1940 MARAVILLA COURT  
City-St-Zip: FORT MYERS, FL 33901

Title: SD  
Name: SANTINI, BETH  
Address: 6146 WHISKEY CREEK DRIVE  
City-St-Zip: FT MYERS, FL 33919

Title: AD  
Name: CHRISTINE, PEETE  
Address: 12340-4 WOODROSE CT.  
City-St-Zip: FORT MYERS, FL 33907

Title: D  
Name: HENDERSON, DETRES  
Address: 3903 34TH STREET SW  
City-St-Zip: LEHIGH ACRES, FL 33976 US

Title: D  
Name: FRANKLIN, OPHIE  
Address: 714 MACARTHUR AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33936

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: SHARON HILL

ED

03/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date