

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# N01000004869

Entity Name: HOLLY OAKS ACADEMY, INC.

Current Principal Place of Business:

1300 WESTLAWN DRIVE
JACKSONVILLE, FL 32211

New Principal Place of Business:

12018 GRAND LAKES DRIVE
JACKSONVILLE, FL 32258

Current Mailing Address:

P.O. BOX 350194
JACKSONVILLE, FL 32235

New Mailing Address:

1279 DEGROVE ROAD
ST. JOHNS, FL 32259

FEI Number: 59-3735928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAINES, TIMOTHY P
3560 SOUTH THIRD ST
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

SCIULLO, MARK V
1279 DEGROVE ROAD
ST JOHNS, FL 32259 US

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: MARK V. SCIULLO

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCIULLO, JODY L
Address: P.O. BOX 350194
City-St-Zip: JACKSONVILLE, FL 32235

Title: VPD () Delete
Name: CURBELO, KAREN
Address: P.O. BOX 350194
City-St-Zip: JACKSONVILLE, FL 32235

Title: D () Delete
Name: SCIULLO, MARK V
Address: P.O. BOX 350194
City-St-Zip: JACKSONVILLE, FL 32235

Title: D () Delete
Name: CURBELO, JOSE O
Address: P.O. BOX 350194
City-St-Zip: JACKSONVILLE, FL 32235

Title: SD () Delete
Name: RAINES, STEFANIE M
Address: 12226 GLENN HOLLOW DRIVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: TD () Delete
Name: RAINES, TIMOTHY P
Address: P.O. BOX 350194
City-St-Zip: JACKSONVILLE, FL 32235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCIULLO, JODY L
Address: 1279 DEGROVE ROAD
City-St-Zip: ST. JOHNS, FL 32259

Title: VPD (X) Change () Addition
Name: CURBELO, KAREN
Address: 12018 GRAND LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32258

Title: D (X) Change () Addition
Name: SCIULLO, MARK V
Address: 1279 DEGROVE ROAD
City-St-Zip: ST JOHNS, FL 32259

Title: D (X) Change () Addition
Name: CURBELO, JOSE O
Address: 12018 GRAND LAKJES DR
City-St-Zip: JACKSONVILLE, FL 32258

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

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: JODY SCIULLO

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date