

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008072

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** FLORIDA SCHOOL FOR INTEGRATED ACADEMICS AND TECHNOLOGIES GAINESVILLE, INC.

**Current Principal Place of Business:**

5301 NE 40TH TERRACE  
GAINESVILLE, FL 32609 US

**New Principal Place of Business:**

**Current Mailing Address:**

217 ESCONDIDO AVENUE #7  
VISTA, CA 920846170

**New Mailing Address:**

2611 TEMPLE HEIGHTS DRIVE, SUITE A  
OCEANSIDE, CA 92056

**FEI Number:** 47-0897469

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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: MS  
Name: LAWSON, ALENA PRES  
Address: 35 NORTH MAIN STREET - P.O. BOX 2820  
City-St-Zip: GAINESVILLE, FL 32602 US

Title: MR  
Name: JONES, TONY DIR  
Address: P. O. BOX 1250  
City-St-Zip: GAINESVILLE, FL 32602 US

Title: MR  
Name: GORDON, BRUCE SEC/TRE  
Address: 3000 NW 83RD STREET - BLDG. S-211  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: MS  
Name: KOLAPO, SAMUEL DIR  
Address: 5301 NE 40TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32609 US

Title: MR  
Name: ZAGAISKI, GERALD VP  
Address: 2400 SW 13TH STREET  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MS  
Name: MILLER, LIN DIR  
Address: 2611 TEMPLE HEIGHTS DRIVE, SUITE A  
City-St-Zip: OCEANSIDE, CA 92056 US

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: LIN MILLER

DIR

04/18/2011

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

\_\_\_\_\_  
Date