

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009500

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** ACADEMIES OF EXCELLENCE, INC.

**Current Principal Place of Business:**

303 WEST MOODY BLVD.  
BUNNELL, FL 32110

**New Principal Place of Business:**

340 N. BOSTON AVE.  
DELAND, FL 32724 UN

**Current Mailing Address:**

340 N. BOSTON AVE.  
DELAND, FL 32724

**New Mailing Address:**

340 N. BOSTON AVE.  
DELAND, FL 32724 UN

**FEI Number:** 13-4227194

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, DOUGLAS K  
340 N. BOSTON AVE.  
DELAND, FL 32724 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: D  
Name: JACKSON, DOUGLAS K  
Address: 340 N. BOSTON AVE.  
City-St-Zip: DELAND, FL 32724 UN

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: DOUGLAS K. JACKSON

D

04/20/2011

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

\_\_\_\_\_  
Date