## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000009634

Entity Name: SPANISH ACADEMIES. INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

447 NW SPANISH RIVER BLVD BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

447 NW SPANISH RIVER BLVD BOCA RATON, FL 33431

FEI Number: 82-0589149 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CARDONA, LEO S DR.

50 SW 10TH DRIVE

BOCA RATON, FL 33486

US

COYOTE ACCOUNTING INC.

12230 W. FOREST HILL BLVD.

SUITE 178

WELLINGTON, FL 33414 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: ALICE GUY AZZARO 04/27/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: CARDONA, LEO DR Name: ANTHONY, SMITH Address: 447 NW SPANISH RIVER BLVD 447 NW SPANISH RIVER BLVD

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33431

Title: VD ( ) Delete Title: VST (X) Change ( ) Addition Name: SMITH, JUDITH A Name: WHITEHEAD, JODI

Address: 447 NW SPANISH RIVER BLVD Address: 447 NW SPANISH RIVER BLVD
City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33431

Title: SD ( ) Delete Title: D (X) Change ( ) Addition Name: WHITNEY, ELIZABETH A Name: BARCIA, SAM

Address: 1823 GOLDEN PONDS DR. Address: 447 NW SPANISH RIVER BLVD City-St-Zip: FT. PIERCE, FL 34945 City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 CARDONA, DAVID
 Name:

 Address:
 447 NW SPANISH RIVER BLVD
 Address:

 City-St-Zip:
 BOCA RATON, FL 33431
 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY SMITH P 04/27/2005