

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003445

FILED
Apr 08, 2005
Secretary of State

Entity Name: ACADEMIES OF AMERICA, INC.

Current Principal Place of Business:

200 TOMOKA AVE
STE A
ORMOND BEACH, FL 32174

New Principal Place of Business:

425 N. CLYDE MORRIS BLVD.
DAYTONA BEACH, FL 32114

Current Mailing Address:

200 TOMOKA AVE
STE A
ORMOND BEACH, FL 32174

New Mailing Address:

425 N. CLYDE MORRIS BLVD.
DAYTONA BEACH, FL 32114

FEI Number: 80-0063637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, DOUGLAS K
200 TOMOKA AVE
STE A
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

JACKSON, DOUGLAS K
425 N. CLYDE MORRIS BLVD.
DAYTONA BEACH, FL 32114 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: DOUGLAS K JACKSON

04/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRADEN, JAY DR.
Address: 2753 S RIDGEWOOD AVENUE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: D () Delete
Name: SNYDER, JAMES
Address: 2753 S RIDGEWOOD AVENUE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: D () Delete
Name: JACKSON, DOUGLAS
Address: 2753 S RIDGEWOOD AVENUE
City-St-Zip: SOUTH DAYTONA, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BRADEN, JAY DR.
Address: 425 N. CLYDE MORRIS BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Change () Addition
Name: SNYDER, JAMES
Address: 425 N. CLYDE MORRIS BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Change () Addition
Name: JACKSON, DOUGLAS
Address: 425 N. CLYDE MORRIS BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

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: DOUGLAS K JACKSON

D

04/08/2005

Electronic Signature of Signing Officer or Director

Date