

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005138

FILED  
May 06, 2012  
Secretary of State

Entity Name: SUCCEED INC.

**Current Principal Place of Business:**

231 LIVE OAK BLVD  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

231 LIVE OAK BLVD  
CASSELBERRY, FL 32707

**New Mailing Address:**

FEI Number: 05-0599435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MIKE, RUSSELL  
70 SACKETT ROAD  
DEBARY, FL 32713 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: M  
Name: MIKE, ROBERT  
Address: 716 FOX VALLEY DRIVE  
City-St-Zip: LONGWOOD, FL

Title: S  
Name: BOUEY, VANESSA  
Address: 103 TIMUCUAN DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: T  
Name: MIKE, RUSSELL  
Address: 70 SACKETT RD  
City-St-Zip: DEBARY, FL 32713

Title: M  
Name: LOWE, PATRICIA  
Address: 206 HOLIDAY LANE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: P  
Name: JONES, JEAN  
Address: 601 S. EDGEMON AVENUE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VP  
Name: REEVES, HAZEL  
Address: 513 YORKSHIRE DRIVE  
City-St-Zip: OVIEDO, FL 32765

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: VANESSA BOUEY

S

05/06/2012

Electronic Signature of Signing Officer or Director

Date