

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006011

FILED  
Mar 04, 2010  
Secretary of State

Entity Name: APPLAUSE ACADEMY, INC.

**Current Principal Place of Business:**

2434 REMINGTON BLVD.  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 701036  
ST. CLOUD, FL 34770

**New Mailing Address:**

2604 TEESIDE CIRCLE  
KISSIMMEE, FL 34746

FEI Number: 20-0115686

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDERSON, LURALEE  
2604 TEESIDE CIRCLE  
KISSIMMEE, FL 34746 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: PRES  
Name: ANDERSON, LURALEE  
Address: 2604 TEESIDE CIRCLE.  
City-St-Zip: KISSIMMEE, FL 34746

Title: S/T  
Name: CHRISTIE, BARBARA  
Address: 203 TYLER CT  
City-St-Zip: AMBLER, FL 19002

Title: D  
Name: ANDERSON, MARK  
Address: 2604 TEESIDE CIR  
City-St-Zip: KISSIMMEE, FL 34746

Title: D  
Name: GROOVER, DAVID  
Address: 2434 REMINGTON BLVD.  
City-St-Zip: KISSIMMEE, FL 34744

Title: D  
Name: IBRAHIM, SANNI  
Address: 505 WILMINGTON  
City-St-Zip: GLEN MILLS, PA 19342

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: BARBARA A CHRISTIE

S/T

03/04/2010

Electronic Signature of Signing Officer or Director

Date