

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003655

FILED
May 01, 2005
Secretary of State

Entity Name: THE COMMITTEE FOR ACADEMIC EXCELLENCE, INC.

Current Principal Place of Business:

10544 LAKE ST. CHARLES BOULEVARD
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

10544 LAKE ST. CHARLES BOULEVARD
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 77-0630408 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KILPATRICK, TIMOTHY B SR.
10544 LAKE ST. CHARLES BOULEVARD
RIVERVIEW, FL 33569 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: P () Delete
Name: KILPATRICK, TIMOTHY B SR.
Address: 7003 COHASSET CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

Title: VP (X) Delete
Name: HARRIS, CANDICE D
Address: 10207 DEVONSHIRE LAKE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: TR () Delete
Name: BAKER, JEFFREY
Address: 731 BERRY BRAMBLE DRIVE
City-St-Zip: BRANDON, FL 33510

Title: SEC () Delete
Name: CLARKE, TANGELA
Address: 1926 SEDGEFIELD STREET
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: SUSAN, RIDER
Address: 2901 FOREST CLUB DRIVE
City-St-Zip: PLANT CITY, FL 33567

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: TIMOTHY B. KILPATRICK, SR.

P

05/01/2005

Electronic Signature of Signing Officer or Director

Date