

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010042

FILED
Apr 14, 2009
Secretary of State

Entity Name: THE EXCEL ACADEMY, INC.

Current Principal Place of Business:

3650 NORTH MIAMI AVENUE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

3575 NORTHWEST 60TH STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 20-4778936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINNON, VALERIE
3575 NORTHWEST 60TH STREET, SUITE 777
MIAMI, FL 33142 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: C () Delete
Name: JOHNSON, DOROTHY
Address: 780 FISHERMAN STREET
City-St-Zip: OPA-LOCKA, FL 33054

Title: VP () Delete
Name: BROWN, CHARLIE
Address: 777 SHARAZAD BLVD.
City-St-Zip: OPA-LOCKA,, FL 33054

Title: T () Delete
Name: RUDOLPH, BESSIE
Address: 3575 NORTHWEST 60TH STREET
City-St-Zip: MIAMI, FL 33142

Title: S () Delete
Name: PICART, DONSEY
Address: 2325 NORTHWEST 166TH STREET
City-St-Zip: MIAMI, FL 33054

Title: D () Delete
Name: WOOTEN, BARBARA JEAN
Address: 3575 NORTHWEST 60TH STREET
City-St-Zip: MIAMI, FL 33142

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VALERIE KINNON

VK

04/14/2009

Electronic Signature of Signing Officer or Director

Date