

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 21, 2009**  
**Secretary of State**

DOCUMENT# N05000010042

**Entity Name:** THE EXCEL ACADEMY, INC.**Current Principal Place of Business:**780 FISHERMAN STREET, SUITE 250  
OPA-LOCKA, FL 33054**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: DOBBS, LOLIDA  
Address: 780 FISHERMAN STREET  
City-St-Zip: OPA-LOCKA, FL 33054

Title: VP (X) Delete  
Name: FELTON, ROBERTA  
Address: 780 FISHERMAN STREET, SUITE 250  
City-St-Zip: OPA-LOCKA,, FL 33054

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

Title: S ( ) Delete  
Name: PICART, DONSEY  
Address: 780 FISHERMAN STREET, SUITE 250  
City-St-Zip: OPA-LOCKA, FL 33054

Title: D ( ) Delete  
Name: JONES, SAMUEL  
Address: 780 FISHERMAN STREET, SUITE 250  
City-St-Zip: OPA-LOCKA, FL 33054

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T (X) Change ( ) Addition  
Name: SHENICIA, O'NEAL  
Address: 780 FISHERMAN STREET  
City-St-Zip: OPA-LOCKA, FL 33054

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

RA

12/21/2009

Electronic Signature of Signing Officer or Director

Date