

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005878

FILED
Apr 01, 2008
Secretary of State

Entity Name: EAST HILL ACADEMY, INC.

Current Principal Place of Business:

1401 WEST GARDEN STREET
PENSACOLA, FL 32501 US

New Principal Place of Business:

1401 WEST GARDEN STREET
PENSACOLA, FL 32502 US

Current Mailing Address:

P.O. BOX 12044
PENSACOLA, FL 32591 US

New Mailing Address:

FEI Number: 20-4969253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUPIT, BARBARA
1401 WEST GARDEN STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

CUPIT, BARBARA
1401 WEST GARDEN STREET
PENSACOLA, FL 32502 US

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: _____

04/01/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CUPIT, BARBARA
Address: 4914 RAVENSWOOD AVENUE
City-St-Zip: PENSACOLA, FL 32506 US

Title: VPTD () Delete
Name: SOELZER, JAN
Address: 303 BEAR DRIVE
City-St-Zip: GULF BREEZE, FL 32561 US

Title: D () Delete
Name: MORAN, JACK
Address: 3421 WEST HIGHWAY 4
City-St-Zip: CENTURY, FL 32535 US

Title: D () Delete
Name: DEVILLE, EARNEST J JR
Address: 4445 PINE VILLA CIRCLE
City-St-Zip: PACE, FL 32571 US

Title: D () Delete
Name: DVORAK, CLAUDIA
Address: 1409 TENDER OAKS LANE
City-St-Zip: PENSACOLA, FL 32506 US

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: D () Change (X) Addition
Name: RADOMSKI, NANCY
Address: 3050 LARKHALL PLACE
City-St-Zip: MILTON, FL 32583

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: JAN SOELZER

VP

04/01/2008

Electronic Signature of Signing Officer or Director

Date