2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2008
Secretary of State

DOCUMENT# N06000007961

Entity Name: NICAEA ACADEMY OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

2200 SANTA BARBARA BLVD
NAPLES, FL 34116

New Principal Place of Business:

1080 COMMONS CIRCLE
NAPLES, FL 34119

Current Mailing Address:

2200 SANTA BARBARA BLVD
NAPLES, FL 34116

New Mailing Address:

1080 COMMONS CIRCLE
NAPLES, FL 34119

FEI Number: 26-0216411 **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:

HUDGINS, THOMAS F
801 12TH AVE SOUTH SUITE 200
NAPLES, FL 34102 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: D ( ) Delete
Name: MCINTYRE, BARTON REV.
Address: 2200 SANTA BARBARA BLVD
City-St-Zip: NAPLES, FL 34116

Title: D ( ) Delete
Name: MCINTYRE, WENDY L
Address: 2200 SANTA BARBARA BLVD
City-St-Zip: NAPLES, FL 34116

Title: D ( ) Delete
Name: MANSOLILLO, ANTHONY
Address: 601 ORCHID DRIVE
City-St-Zip: NAPLES, FL 34102

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:

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: ANTHONY J DURSO ACCT 07/24/2008

Electronic Signature of Signing Officer or Director — Date