

**2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 02, 2012  
Secretary of State**

DOCUMENT# N06000009172

Entity Name: EXCELSIOR ACADEMIES, INC.

**Current Principal Place of Business:**

11828 SW 77TH TERRACE  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

11828 SW 77TH TERRACE  
MIAMI, FL 33183

**New Mailing Address:**

FEI Number: 26-2248006      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOWER, ALICIA R  
11828 SW 77TH TERRACE  
MIAMI, FL 33183      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: PCD  
Name: TRILLES, CLAUDIA  
Address: 11828 SW 77TH TERRACE  
City-St-Zip: MIAMI, FL 33183 US

Title: SD  
Name: MORE, DULCE  
Address: 11828 SW 77TH TERRACE  
City-St-Zip: MIAMI, FL 33183 US

Title: D  
Name: BECEIRO, MAYDELIN  
Address: 11828 SW 77TH TERRACE  
City-St-Zip: MIAMI, FL 33183

Title: D  
Name: MORALES, LILIANA  
Address: 11828 SW 77TH TERRACE  
City-St-Zip: MIAMI, FL 33183

Title: D  
Name: DEARMAS, SYLVIA  
Address: 11828 SW 77TH TERRACE  
City-St-Zip: MIAMI, FL 33183

I hereby 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 all other like empowered.

SIGNATURE: CLAUDIA TRILLES

PCD

02/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date