

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012021

FILED
Apr 29, 2012
Secretary of State

Entity Name: THE ALLIANCE OF NEW SCHOOLS OF THOUGHT, INC.

Current Principal Place of Business:

4115 HEATH ROAD
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

4115 HEATH ROAD
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 35-2290017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWZE, YVONNE SIMMONS
4115 HEATH ROAD
JACKSONVILLE, FL 32277 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: PD
Name: HOWZE, YVONNE DR.
Address: 4115 HEATH ROAD
City-St-Zip: JACKSONVILLE, FL 32277

Title: VPD
Name: BERRY, ZINA DR.
Address: 325 UNIVERSITY AVENUE
City-St-Zip: SYRACUSE, NY 13210

Title: TD
Name: HOWZE, VERSHAUN
Address: 1095 CALUMET LANE
City-St-Zip: FLORISSANT, MO 63033

Title: SD
Name: HOWZE, CHELSEA MARIE
Address: 176 BROOKFALL DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D
Name: SMITH, SYLVESTER JR.
Address: 2306 BALBOA ROAD
City-St-Zip: AUSTIN, TX 78733

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: DR. YVONNE SIMMONS HOWZE

PD

04/29/2012

Electronic Signature of Signing Officer or Director

Date