

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004483

FILED
Mar 08, 2009
Secretary of State

Entity Name: HALO ACADEMY, INC.

Current Principal Place of Business:

19046 BRUCE B. DOWNS BLVD.,PMB 127
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

19046 BRUCE B. DOWNS BLVD.,PMB 127
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-8978477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVE
TAMPA, FL 33602 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: RAILE, CHRISTY
Address: 19046 BRUCE B DOWNS PMB 127
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: DYSART, KAREN
Address: 19046 BRUCE B DOWNS PMB 127
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: HULSE, KATHY
Address: 19046 BRUCE B DOWNS
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: DAVIS, JOHN W
Address: 19046 BRUCE B DOWNS
City-St-Zip: TAMPA, FL 33647

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:

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: CHRISTY RAILE

D

03/08/2009

Electronic Signature of Signing Officer or Director

Date