

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001055

FILED
Apr 11, 2009
Secretary of State

Entity Name: TEEN SCENE ACADEMY, INC

Current Principal Place of Business:

8147 HATTERAS DR
WEBSTER, FL 33597 US

New Principal Place of Business:

Current Mailing Address:

8147 HATTERAS DR
WEBSTER, FL 33597 US

New Mailing Address:

FEI Number: 26-1882112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, HEATHER H
8147 HATTERAS DR
WEBSTER, FL 33597 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: P () Delete
Name: DAVIS, HEATHER H
Address: 8147 HATTERAS DR
City-St-Zip: WEBSTER, FL 33597 US

Title: VP () Delete
Name: DAVIS, RANDY W
Address: 8147 HATTERAS DR
City-St-Zip: WEBSTER, FL 33597 US

Title: S/T () Delete
Name: LAY, FRED
Address: 2818 BRYAN RD
City-St-Zip: BRANDON, FL 33511 US

Title: D () Delete
Name: WEST, MARK
Address: 1700 E. BLOOMINGDALE AVE
City-St-Zip: VELTRICO, FL 35596

Title: D () Delete
Name: YARBOROUGH, ANGELA
Address: 13228 N. CENTRAL AVE
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: RUDAY, JOYCE
Address: 38501 CENTRNIAL RD
City-St-Zip: DADE CITY, FL 33525

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
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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: HEATHER H. DAVIS

P

04/11/2009

Electronic Signature of Signing Officer or Director

Date