

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004720

FILED  
May 19, 2009  
Secretary of State

Entity Name: DEARMON CREATIVE ARTS SCHOOL INC.

**Current Principal Place of Business:**

405 HAYNES RD  
LUTZ, FL 33549

**New Principal Place of Business:**

405 HAYES RD  
LUTZ, FL 33549

**Current Mailing Address:**

405 HAYNES RD  
LUTZ, FL 33549

**New Mailing Address:**

405 HAYES RD  
LUTZ, FL 33549

FEI Number: 26-2759952      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:**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 US

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: DEARMON, SHARON  
Address: 1546 EL TAIR TRAIL  
City-St-Zip: CLEARWATER, FL 33765

Title: S ( ) Delete  
Name: PERRAULT, KIM  
Address: 405 HAYES RD.  
City-St-Zip: LUTZ, FL 33549

Title: T ( ) Delete  
Name: DEARMON, SHARON  
Address: 1456 EL TAIR TRAIL  
City-St-Zip: CLEARWATER, FL 33765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: PERRAULT, KIMBERLY  
Address: 405 HAYES RD.  
City-St-Zip: LUTZ, FL 33549

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: KYM PERRAULT

SEC

05/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date