

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005451

FILED
Jan 17, 2012
Secretary of State

Entity Name: CRC ARTS ACADEMY, INC.

Current Principal Place of Business:

10005 GATE PARKWAY NORTH
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

10005 GATE PARKWAY NORTH
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 27-0337409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

F&L CORP
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202-501 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
Name: GIDDENS, CATHY
Address: 10005 GATE PARKWAY NORTH
City-St-Zip: JACKSONVILLE, FL 32246

Title: D
Name: WARE, DABNEY
Address: 10005 GATE PARKWAY NORTH
City-St-Zip: JACKSONVILLE, F 32246

Title: D
Name: TOUCHTON, RANDY
Address: 10005 GATE PARKWAY NORTH
City-St-Zip: JACKSONVILLE, FL 32246

Title: D
Name: CRIPPS, VICTORIA
Address: 10005 GATE PARKWAY NORTH
City-St-Zip: JACKSONVILLE, FL 32246

Title: D
Name: MCCREA, JOYE O
Address: 10005 GATE PARKWAY NORTH
City-St-Zip: JACKSONVILLE, FL 32246

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: VICTORIA L. CRIPPS

D

01/17/2012

Electronic Signature of Signing Officer or Director

Date