

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005097

FILED
Apr 20, 2012
Secretary of State

Entity Name: ACADEMIC INTERVENTION MENTORING & SOCIAL SERVICES, INC.

Current Principal Place of Business:

59 JAYTEE CT.
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

59 JAYTEE CT.
HAVANA, FL 32333

New Mailing Address:

FEI Number: 80-0600836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, WALTER C
59 JAYTEE CT.
HAVANA, FL 32333 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: HENDERSON, WALTER C
Address: 59 JAYTEE CT.
City-St-Zip: HAVANA, FL 32333

Title: VD
Name: HENDERSON, MIRIAM D
Address: 59 JAYTEE CT.
City-St-Zip: HAVANA, FL 32333

Title: SD
Name: LYONS, LEE
Address: 4345 COOL EMERALD DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD
Name: WILLIAMS, ALVIN
Address: 3515 BLUE SPRUCE CT.
City-St-Zip: TALLAHASSEE, FL 32311

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: WALTER C. HENDERSON

PD

04/20/2012

Electronic Signature of Signing Officer or Director

Date