

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 05, 2011
Secretary of State

DOCUMENT# N10000009128

Entity Name: THE VOLLEYBALL ACADEMY OF WINTER SPRINGS INC.**Current Principal Place of Business:**610 DOLPHIN RD
WINTER SPRINGS, FL 32708**New Principal Place of Business:**380 W. STATE ROAD 434
WINTER SPRINGS, FL 32708**Current Mailing Address:**610 DOLPHIN RD
WINTER SPRINGS, FL 32708**New Mailing Address:**380 W. STATE ROAD 434
WINTER SPRINGS, FL 32708**FEI Number:** 27-4065268**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAPHAEL, ISAAC T
610 DOLPHIN RD
WINTER SPRINGS, FL 32708 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/P
Name: RAPHAEL, ISAAC T
Address: 610 DOLPHIN RD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D/V/P
Name: RAPHAEL, JACQUELINE M
Address: 610 DOLPHIN RD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: O
Name: RAPHAEL, ISHAQ J
Address: 610 DOLPHIN RD
City-St-Zip: WINTER SPRINGS, FL 32708

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: ISAAC RAPHAEL

DIR

12/05/2011

Electronic Signature of Signing Officer or Director

Date