

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009768

FILED  
Apr 29, 2012  
Secretary of State

**Entity Name:** RELEVANT ARTS INSTRUCTION FOCUSED ON SELF ESTEEM, INC.

**Current Principal Place of Business:**

606 LIGHTSEY LANE  
LUTZ, FL 33548 US

**New Principal Place of Business:**

**Current Mailing Address:**

606 LIGHTSEY LANE  
LUTZ, FL 33548 US

**New Mailing Address:**

**FEI Number:** 27-3722144

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SCAFFE, MELINDA T  
606 LIGHTSEY LANE  
LUTZ, FL 33548 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: PRES  
Name: WATSON, DANIEL  
Address: 606 LIGHTSEY LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: SECR  
Name: SCAFFE, MELINDA  
Address: 606 LIGHTSEY LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: TREA  
Name: BUCHANAN, ALLENA  
Address: 606 LIGHTSEY LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: DIRE  
Name: WATSON, VICTORIA  
Address: 606 LIGHTSEY LANE  
City-St-Zip: LUTZ, FL 33548 US

Title: DIRE  
Name: WATSON, DANIEL  
Address: 606 LIGHTSEY LANE  
City-St-Zip: LUTZ, FL 33548

Title: DIRE  
Name: SCAFFE, MELINDA  
Address: 606 LIGHTSEY LANE  
City-St-Zip: LUTZ, FL 33548

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: MELINDA.T. SCAFFE

SECR

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date