

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003163

FILED
Sep 26, 2012
Secretary of State

Entity Name: CLASSROOM CHAMPIONS, INC.

Current Principal Place of Business:

4219 PINE NEEDLE LANE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4219 PINE NEEDLE LANE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEARING, KATIE
ONE ENTERPRISE CENTER
225 WATER STREET #1500
JACKSONVILLE, FL 32202 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: MESLER, STEVEN M
Address: 4219 PINE NEEDLE LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: PARISE, LEIGH M
Address: 4219 PINE NEEDLE LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: SHANLEY, PETER T
Address: 4219 PINE NEEDLE LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: FELDMAN, JOEL
Address: 4219 PINE NEEDLE LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: ZYLKA, EDWARD
Address: 4219 PINE NEEDLE LANE
City-St-Zip: JACKSONVILLE, FL 32210

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: STEVEN M. MESLER

D

09/26/2012

Electronic Signature of Signing Officer or Director

Date