

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003343

FILED  
Aug 21, 2012  
Secretary of State

**Entity Name:** EDUVENTURE CAPITAL, INC.

**Current Principal Place of Business:**

3214 SUNNYBROOK AVE S  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

861 TOWNSEND BLVD  
JACKSONVILLE, FL 32211

**Current Mailing Address:**

3214 SUNNYBROOK AVE S  
JACKSONVILLE, FL 32254

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

JACKSON, NICOLE  
3214 SUNNYBROOK AVE S  
JACKSONVILLE, FL 32254    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: C/P  
Name: JACKSON, NICOLE  
Address: 3214 SUNNYBROOK AVE S  
City-St-Zip: JACKSONVILLE, FL 32254

Title: CEO  
Name: JACKSON, NICOLE  
Address: 3214 SUNNYBROOK AVE S  
City-St-Zip: JACKSONVILLE, FL 32254

Title: T  
Name: JACKSON, DAMIAN R  
Address: 1606 KING STREET #15  
City-St-Zip: JACKSONVILLE, FL 32204

Title: S  
Name: COLLINS, DONTE' D  
Address: 3214 SUNNYBROOK AVE S  
City-St-Zip: JACKSONVILLE, FL 32254

Title: PRES  
Name: JACKSON, NICOLE  
Address: 3214 SUNNYBROOK AVE S  
City-St-Zip: JACKSONVILLE, FL 32254

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: NICOLE JACKSON

C/P

08/21/2012

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

\_\_\_\_\_  
Date