## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11000003671

FILED Apr 24, 2012 Secretary of State

Entity Name: CARING FOR GIRLS ACADEMY, INC.

Current Principal Place of Business: New Principal Place of Business:

4556 CORTEZ WAY SOUTH SAINT PETERSBURG, FL 33712

Current Mailing Address: New Mailing Address:

4556 CORTEZ WAY SOUTH SAINT PETERSBURG, FL 33712

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

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

HOOKER, SHARI 4556 CORTEZ WAY SOUTH SAINT PETERSBURG, FL 33712 US

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: CULBRETH, CHRISTOPHER M I Address: 510 33RD AVE NORTH City-St-Zip: ST PETERSBURG, FL 33704

Title: D

 Name:
 WELCH, DONNA

 Address:
 2335 22ND AVE S

 City-St-Zip:
 ST PETERSBURG, FL 33712

Title: D

Name: SMITH, JOE Address: P O BOX 4072

City-St-Zip: ST PETERSBURG, FL 33731

Title: F

Name: HOOKER, SHARI

Address: 4556 CORTEZ WAY SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: VP

Name: GOODRIDGE, WANDA Address: 2537 17TH AVE S

City-St-Zip: SAINT PETERSBURG, FL 33712

Title:

Name: NICHOLS, ELAINE Address: 1340 15TH AVE S

City-St-Zip: SAINT PETERSBURG, FL 33705

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: SHARI HOOKER P 04/24/2012