

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33716

FILED
Jan 07, 2011
Secretary of State

Entity Name: COMMUNITIES IN SCHOOLS OF FLORIDA, INC.

Current Principal Place of Business:

444 APPELYARD DRIVE
TALLAHASSEE, FL 32304 US

New Principal Place of Business:

Current Mailing Address:

444 APPELYARD DRIVE
TALLAHASSEE, FL 32304 US

New Mailing Address:

FEI Number: 65-0139769 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GRACEY, LOIS L
444 APPELYARD DRIVE
TALLAHASSEE, FL 32304 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: CD
Name: MESSERSMITH, FRANK
Address: 2901 LAKE BRADFORD RD. S.
City-St-Zip: TALLAHASSEE, FL 32310

Title: TD
Name: GARBARINO, GUY
Address: 425 S. LEGACY TRAIL
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: SD
Name: BRAMBLETT, CINDY
Address: 516 N ADAMS ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: PD
Name: GRACEY, LOIS L
Address: 444 APPELYARD DRIVE
City-St-Zip: TALLAHASSEE, FL 32304

Title: VCD
Name: MARSIGLIO, CINDI
Address: 3539 APALACHEE PKWY, SUITE 3-148
City-St-Zip: TALLAHASSEE, FL 32311

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: LOIS L. GRACEY

PD

01/07/2011

Electronic Signature of Signing Officer or Director

Date