

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002896

FILED  
Feb 20, 2007  
Secretary of State

**Entity Name:** COMMUNITIES IN SCHOOLS OF NASSAU COUNTY, INC.

**Current Principal Place of Business:**

516 SOUTH 10TH ST  
SUITE 205  
FERNANDINA BEACH, FL 32034 US

**New Principal Place of Business:**

**Current Mailing Address:**

516 SOUTH 10TH ST  
SUITE 205  
FERNANDINA BEACH, FL 32034 US

**New Mailing Address:**

**FEI Number:** 59-3191350

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILANA, SUSAN  
516 SOUTH 10TH ST  
SUITE 205  
FERNANDINA BEACH, FL 32034 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 ( ) Delete  
Name: WATSON, AL  
Address: 69 LONG POINT DRIVE  
City-St-Zip: FERNANDINA BCH, FL 32034

Title: SD ( ) Delete  
Name: JERVIS, MARY  
Address: 9 JUNIPER COURT  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VC ( ) Delete  
Name: SCHWEIZER, PHIL  
Address: 1416 LEWIS ST  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD ( ) Delete  
Name: NELSON, SUSAN  
Address: 404 BEACHSIDE PLACE  
City-St-Zip: FERNANDINA BEACH, FL 32034

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C (X) Change ( ) Addition  
Name: SCHWEIZER, PHIL  
Address: 1416 LEWIS ST  
City-St-Zip: FERNANDINA BCH, FL 32034

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VC (X) Change ( ) Addition  
Name: NELSON, SUSAN  
Address: 404 BEACHSIDE PLACE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD (X) Change ( ) Addition  
Name: USERY, MELVIN  
Address: PO BOX 15357  
City-St-Zip: FERNANDINA BEACH, FL 32035

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SUSAN L MILANA

ED

02/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date