

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003282

FILED
Apr 15, 2009
Secretary of State

Entity Name: INNOVATION SCHOOL OF EXCELLENCE, INC.

Current Principal Place of Business:

333 AUSLEY ROAD
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

329 AUSLEY ROAD
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-3252917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND, JACK P
15051 LELAND CIR
TALLAHASSEE, FL 32308 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: BOD () Delete
Name: SCOTT, REGINA
Address: 2087 COMET DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: BOD () Delete
Name: JONES, DR. SHIRLEY PHD
Address: 3138 CORRIB DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: BOD () Delete
Name: THOMAS, CORNELL
Address: 4437 WESTOVER DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: BOD () Delete
Name: FIELDS, DR. ANIKA PHD
Address: 3601 WESTMORELAND DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: BOD () Delete
Name: BUTLER, JEFF DEA.
Address: 147 MASON DR
City-St-Zip: HAVANA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: BOD (X) Change () Addition
Name: MCHARDY, REGINA CHAIR
Address: 329 AUSLEY ROAD
City-St-Zip: TALLAHASSEE, FL 32304

I hereby certify that the information supplied with this filing does not qualify 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: REGINA MCHARDY

CHAI

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date