

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 06, 2012
Secretary of State

DOCUMENT# N97000003657

Entity Name: S.O.C.K. OUTSTANDING STUDENTS (S.O.S.) ACADEMY, INC.**Current Principal Place of Business:**6974 WILSON BLVD.
JACKSONVILLE, FL 32210**New Principal Place of Business:****Current Mailing Address:**6974 WILSON BLVD.
JACKSONVILLE, FL 32210**New Mailing Address:****FEI Number:** 59-3454447**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HILL, KAYE G
6974 WILSON BLVD.
JACKSONVILLE, FL 32210 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: PC
Name: SALARY, MARVA J
Address: 6825 RHODE ISLAND DR
City-St-Zip: JACKSONVILLE, FL 32208

Title: SEC
Name: HAYWOOD, LILLIAN
Address: 5019 TALLYHO COURT
City-St-Zip: JACKSONVILLE, FL 32208

Title: DIR
Name: MCCLENDON, FREDERICK
Address: 6620 ARANCIO DR W
City-St-Zip: JACKSONVILLE, FL 32244

Title: D
Name: FOY, DONALD
Address: 11516 WHISPERING BROOK LANE W
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: ORANGE, BOBBY
Address: 3653 AUGUST CROSSING CT
City-St-Zip: JACKSONVILLE, FL 32210

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: MARVA SALARY

PC

03/06/2012

Electronic Signature of Signing Officer or Director

Date