

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Mar 25, 2009**  
**Secretary of State**

DOCUMENT# N99000003738

**Entity Name:** ACADEMIC COMMUNICATIONS INC.**Current Principal Place of Business:**1938 SW LIBRA LANE  
PORT ST. LUCIE, FL 34984 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 67  
SEFFNER, FL 33583 US**New Mailing Address:****FEI Number:** 90-0438690**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BOLLES, RICHARD  
5161 N.W. 87 AVENUE  
LAUDERHILL, FL 33351 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: P ( ) Delete  
Name: DAVID, JONATHAN  
Address: 4832 N. SR 7, #304  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: S ( ) Delete  
Name: BOLLES, RICHARD  
Address: 5161 N.W. 87 AVENUE  
City-St-Zip: LAUDERHILL, FL 33351 US

Title: V.P. ( ) Delete  
Name: HYACINLHE, TANIA M  
Address: 1913 RAVEN RUN DR  
City-St-Zip: DOVER, FL 33527 US

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

Title: P (X) Change ( ) Addition  
Name: BOWLES, JONATHAN D  
Address: 5161 N.W. 87 AVENUE  
City-St-Zip: LAUDERHILL, FL 33351 US

Title: S (X) Change ( ) Addition  
Name: BOWLES, RICHARD A  
Address: 5161 N.W. 87 AVENUE  
City-St-Zip: LAUDERHILL, FL 33351 US

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

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: RICHARD A BOWLES

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03/25/2009

Electronic Signature of Signing Officer or Director

Date