

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003738

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** ACADEMIC COMMUNICATIONS INC.

**Current Principal Place of Business:**

5161 NW 87 AVE  
LAUDERHILL, FL 33351 US

**New Principal Place of Business:**

**Current Mailing Address:**

5161 NW 87 AVE  
LAUDERHILL, FL 33351 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  
**Name:** BOWLES, JONATHAN D  
**Address:** 5161 N.W. 87 AVENUE  
**City-St-Zip:** LAUDERHILL, FL 33351 US

**Title:** S  
**Name:** BOWLES, RICHARD A  
**Address:** 5161 N.W. 87 AVENUE  
**City-St-Zip:** LAUDERHILL, FL 33351 US

**Title:** V.P.  
**Name:** BOWLES, ASHLEY J  
**Address:** 5161 NW 87 AVE  
**City-St-Zip:** LAUDERHILL, FL 33351 US

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:** RICHARD BOWLES

S

05/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date