2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N99000004938

Entity Name: ACADEMY AT THE LAKES, INC.

Current Principal Place of Business:

2331 COLLIER PARKWAY
LAND O' LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

2331 COLLIER PARKWAY
LAND O' LAKES, FL 34639

New Mailing Address:

2220 COLLIER PARKWAY
LAND O' LAKES, FL 34639

FEI Number: 59-3592809 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
STE 4
WESTON, FL 33331 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:	PD	( ) Delete
Name:	MARTIN, CYNTHIA	
Address:	16368 HEATHROW DRIVE	
City-St-Zip:	TAMPA, FL 33647	
Title:	SEC	( ) Delete
Name:	KRETZINGER, MICHAEL	
Address:	22511 HALE ROAD	
City-St-Zip:	LAND O LAKES, FL 34639	
Title:	TREA	( ) Delete
Name:	DRYER, STEPHEN	
Address:	16366 HEATHROW DRIVE	
City-St-Zip:	TAMPA, FL 33647	
Title:	VP	( ) Delete
Name:	KIMBALL, ADRIENNE	
Address:	28913 STORMCLOUD PASS	
City-St-Zip:	WESLEY CHAPEL, FL 33543	

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:	

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: DORIE H BURNHAM CFO 03/23/2009

Electronic Signature of Signing Officer or Director — Date