## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000006756

Name:

Address:

City-St-Zip:

MEAD CIR.

PORT ST. LUCIE, FL

FILED Jun 15, 2004 Secretary of State

Entity Name: NEW SOCIETY ACADEMY, INC. **Current Principal Place of Business: New Principal Place of Business:** 6665 SUNSET STRIP SUNRISE, FL 33313 **Current Mailing Address: New Mailing Address:** 6665 SUNSET STRIP SUNRISE, FL 33313 FEI Number: 31-1677587 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAWRENCE, RUTH 4511 NW 32ND CT. LAUDERDALE LAKES, FL 33319 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LAWRENCE, RUTH Name: Name: Address: 4511 NW 32ND CT. Address: City-St-Zip: LAUDERDALE LAKES, FL 33319 City-St-Zip: ( ) Delete Title: VD Title: () Change () Addition LAWRENCE, JOHN Name: Name: Address: 4511 NW 32ND CT. Address: LAUDERDALE LAKES, FL 33319 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition SESSION, RACQUEL Name: Name: 1810 NW 35TH AVE. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33311 City-St-Zip: Title: ( ) Delete Title: () Change () Addition HAMILTON, ASHLEY JR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RUTH LAWRENCE MRS. 06/15/2004