

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015688

FILED
Apr 28, 2005
Secretary of State

Entity Name: ADVANCED MENTOR PERFORMING ARTS ACADEMY, INC.

Current Principal Place of Business:

8092 BRENTON CIR
FT MYERS, FL 33912

New Principal Place of Business:

12997 CLEVELAND AVE.
SUITE 260
FT MYERS, FL 33907

Current Mailing Address:

8092 BRENTON CIR
FT MYERS, FL 33912

New Mailing Address:

12997 CLEVELAND AVE.
SUITE 260
FT MYERS, FL 33907

FEI Number: 65-1169502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIEKAMP, SUSAN A
8092 BRENTON CIR
FT MYERS, FL 33912 US

Name and Address of New Registered Agent:

NIEKAMP, SUSAN A
8092 BRETON CIR
FT MYERS, FL 33912 US

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: SUSAN NIEKAMP

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NIEKAMP, SUSAN A
Address: 8092 BRENTON CIR
City-St-Zip: FT MYERS, FL 33912

Title: D () Delete
Name: NIEKAMP, LARRY S
Address: 8092 BRENTON CIR
City-St-Zip: FT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NIEKAMP, SUSAN A
Address: 8092 BRETON CIR
City-St-Zip: FT MYERS, FL 33912

Title: D (X) Change () Addition
Name: NIEKAMP, LARRY S
Address: 8092 BRETON CIR
City-St-Zip: FT MYERS, FL 33912

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN A NIEKAMP

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date