

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000033164

Entity Name: CASTLE BROOK ACADEMY, INC.

FILED
Mar 20, 2008
Secretary of State

Current Principal Place of Business:

2755 OLD MOULTRIE RD
ST AUGUSTINE, FL 32084

New Principal Place of Business:

2755 OLD MOULTRIE RD
ST AUGUSTINE, FL 32086

Current Mailing Address:

2755 OLD MOULTRIE RD
ST AUGUSTINE, FL 32084

New Mailing Address:

2755 OLD MOULTRIE RD
ST AUGUSTINE, FL 32086

FEI Number: 51-0569262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTTON, DON
3921 VAILL POINT TERRACE
ST AUGUSTINE, FL 32086 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: SUTTON, DON
Address: 2755 OLD MOULTRIE RD
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP () Delete
Name: SUTTON, DON
Address: 2755 OLD MOULTRIE RD
City-St-Zip: ST AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: DONALD J. SUTTON

PRES

03/20/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date