2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000085666

Entity Name: EXCEL LEARNING ACADEMY, INC

FILED Oct 08, 2009 Secretary of State

y	mer Excel	LEAR (MINO ACABEMIT, IIVO.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	STREET WI ON, FL 3420				
Current M	lailing Addre	ess:	New Mailing Addres	New Mailing Address:	
PO BOX 121 ELLENTON, FL 34222			1720 11TH STREET WEST BRADENTON, FL 34205		
FEI Number	: 26-0605440	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
PARRISH, The above	NGTON DR , FL 34219	US submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE: LINDA C				
Election Car	ce with s. 607.1	onic Signature of Registered Age 93(2)(b), F.S., the corporation did no ng Trust Fund Contribution (). CTORS:	ot receive the prior notice.	Date ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (OWEN, LINDA 5809 LEXING PARRISH, FL	TON DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (OWEN, EDSII PO BOX 121 ELLENTON, F		Title: Name: Address: City-St-Zin:	() Change () Addition	

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: LINDA OWEN P 10/08/2009