## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000052007

JACKSONVILLE, FL 32219

City-St-Zip:

FILED Feb 11, 2006 Secretary of State

Entity Nar	ne: COMMUN	IITY ACADEMY, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	MUNITY ROAL VILLE, FL 322						
Current M	ailing Addres	s:	New Maili	New Mailing Address:			
6666 CRYSTAL RIVER RD. E. JACKSONVILLE, FL 32219				2655 COMMUNITY RD. JACKSONVILLE, FL 32207			
FEI Number:	59-3389036	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired (X)	)	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	NICE E MUNITY ROAI VILLE, FL 322						
	named entity s e of Florida.	submits this statement for the	purpose of changing i	its registere	d office or registered agent, or b	oth,	
SIGNATUR							
Election Car		ic Signature of Registered Ag Trust Fund Contribution ( ).	ent		Date		
			ADDITION	ICIOHANOI	ES TO OFFICERS AND DIREC	TODE.	
OFFICER	S AND DIREC	ioks:	ADDITION	15/CHANGI	ES TO OFFICERS AND DIREC	IUKS:	
Title:		Delete	Title:		() Change () Addition		
Name: Address:	ALLEN, JANICE 2655 COMMUNI		Name: Address:				
City-St-Zip:	JACKSONVILLE		City-St-Zip:				
Title:	, ,	Delete	Title:	V	(X) Change ( ) Addition		
Name: Address:	WHITE, CHANTI 8086 KESWICK		Name: Address:	WHITE, CHA 2655 COMM			
City-St-Zip:	JACKSONVILLE		City-St-Zip:		LLE, FL 32207		
Title:	T ()	Delete	Title:	Т	(X) Change ( ) Addition		
Name:	WHITE, IVORY		Name:	WHITE, IVO	· · · · · · · · · · · · · · · · · · ·		
Address:	8089 KESWICK COURT		Address:	•			
City-St-Zip:	JACKSONVILLE	E, FL 32244	City-St-Zip:	JACKSONVI	LLE, FL 32207		
Title:	D ()	Delete	Title:	D	(X) Change ( ) Addition		
Name:	ALLEN, LARRY		Name:	ALLEN, LAR			
Address:	6666 CRYSTAL	RIVER RD. E.	Address:	2655 COMN	IUNITY RD.		

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

JACKSONVILLE, FL 32207

SIGNATURE: JANICE E. ALLEN Ρ 02/11/2006