

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047636

FILED
Mar 17, 2008
Secretary of State

Entity Name: TEACHER'S HANDS ACADEMY INC.

Current Principal Place of Business:

3057-2 CURRY FORD RD
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

1014 B OHIO AVE
PALM HARBOR, FL 34683

New Mailing Address:

FEI Number: 59-3576901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORMIER, KATHLEEN A
1014 B OHIO AVE
PALM HARBOR, FL 34683 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: P () Delete
Name: RICHENBACHER, KEITH
Address: 476 WEST VERMONT AVE
City-St-Zip: ESCONDIDO, CA 92025

Title: D () Delete
Name: RETHWISCH, CAROLYN
Address: 4036 ANDOVER CAY BLVD
City-St-Zip: ORLANDO, FL 32825

Title: VP () Delete
Name: PAGE, JOHN
Address: 476 WEST VERMONT AVE
City-St-Zip: ESCONDIDO, CA 92025

Title: ST () Delete
Name: CORMIER, KATHLEEN
Address: 1014 B OHIO AVE
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KATHLEEN A CORMIER

TR

03/17/2008

Electronic Signature of Signing Officer or Director

_____ Date