

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003318

FILED  
Apr 13, 2012  
Secretary of State

Entity Name: US DREAM ACADEMY, INC.

## Current Principal Place of Business:

10400 LITTLE PATUXENT PARKWAY  
SUITE 300  
COLUMBIA, MD 21044

## New Principal Place of Business:

5950 SYMPHONY WOODS ROAD  
SUITE 504  
COLUMBIA, MD 21044

## Current Mailing Address:

C/O SIMMS SHOWERS LLP  
305 HARRISON ST SE 300  
LEESBURG, FL 33470

## New Mailing Address:

C/O SIMMS SHOWERS LLP  
305 HARRISON ST SE 3RD FLOOR  
LEESBURG, VA 20175

FEI Number: 59-3514841

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INCORP SERVICES, INC.  
17888 67 CT N  
LOXAHATCHEE, FL 33470 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

## OFFICERS AND DIRECTORS:

Title: CEO  
Name: WALLACE-BOOKER, DIANE  
Address: 5950 SYMPHONY WOODS ROAD, SUITE 504  
City-St-Zip: COLUMBIA, MD 21044

Title: PRES  
Name: PHIPPS, WINTLEY  
Address: 5950 SYMPHONY WOODS ROAD, SUITE 504  
City-St-Zip: COLUMBIA, MD 21044

Title: D  
Name: VICTOR, JODY  
Address: 5950 SYMPHONY WOODS ROAD, SUITE 504  
City-St-Zip: COLUMBIA, MD 21044

Title: D  
Name: FARRELL, TIM  
Address: 5950 SYMPHONY WOODS ROAD, SUITE 504  
City-St-Zip: COLUMBIA, MD 21044

Title: D  
Name: BLACK, BARRY ADMIRAL  
Address: 5950 SYMPHONY WOODS ROAD, SUITE 504  
City-St-Zip: COLUMBIA, MD 21044

Title: D  
Name: CARSON, BENJAMIN  
Address: 5950 SYMPHONY WOODS ROAD, SUITE 504  
City-St-Zip: COLUMBIA, MD 21044

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIANE WALLACE-BOOKER

CEO

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date