

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005173

Entity Name: COLOURS SCHOOL OF THE ARTS OF SOUTH WEST FLORIDA INC.**FILED**
May 04, 2013
Secretary of State
CC0647347990**Current Principal Place of Business:**12821 COMMERCE LAKE DRV
SUITE #3 AND #4
FORT MYERS, FL 33913**Current Mailing Address:**P.O. BOX 758
LEHIGH ACRES, FL 33970 US**FEI Number: 65-1091166****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HILL, SHARON I
12821 COMMERCE LAKE DRV
SUITE #3 AND #4
FORT MYERS, FL 33913 US*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

Officer/Director Detail :

Title	AD
Name	CHRISTINE, PEETE
Address	1706 14 TH STREET E
City-State-Zip:	LEHIGH ACRES FL 33972

Title	TD
Name	HENDERSON, DETRES
Address	3903 34TH STREET SW
City-State-Zip:	LEHIGH ACRES FL 33976

Title	CHAIRMAN/DIRECTOR
Name	CARO, JACKIE
Address	8181 SAN CARLOS CIRCLE
City-State-Zip:	FORT MYERS FL 33967

Title	CFO
Name	PINEDO, MILADY
Address	3931 21 ST STREET W
City-State-Zip:	LEHIGH ACRES FL 33971

Title	PUBLIC RELATIONS OFFICER/DIRECTOR
Name	MCDONALD, TOM
Address	8181 SAN CARLOS CIRCLE
City-State-Zip:	FORT MYERS FL 33967

Title	VC, /DIRECTOR
Name	PHILLIPS, MERCIDIEU
Address	538 WHISPERING WIND BEND
City-State-Zip:	LEHIGH ACRES FL

Title	DIRECTOR
Name	BRUNSON, LATARA
Address	2445 PARK ROAD
City-State-Zip:	LEHIGH ACRES FL 33971

Title	DIRECTOR
Name	ETIENNE, NERLYNN
Address	12821 COMMERCE LAKE DRV SUITE #3 AND #4
City-State-Zip:	FORT MYERS FL 33913

Continues on page 2

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: SHARON HILL**REGISTERED AGENT****05/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WILLIAMS , CHERYL
Address 18323 MINOREA LANE
City-State-Zip: LEHIGH ACRES FL 33936

Title EXECUTIVE DIRECTOR
Name HILL , SHARON
Address 12821 COMMERCE LAKE DRV
 SUITE #3 AND #4
City-State-Zip: FORT MYERS FL 33913