

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M28818

**Entity Name:** ACADEMY FOR LITTLE PEOPLE OF WEST PALM BEACH, INC.

**Current Principal Place of Business:**

4639 N MILITARY TRAIL  
WEST PALM BCH., FL 33409-7808

**Current Mailing Address:**

4639 N MILITARY TRAIL  
W PALM BCH., FL 33409-7808

**FEI Number:** 59-2716282

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

PARK, KEITH H  
2240 PALM BEACH LAKES BOULEVARD  
SUITE 200  
WEST PALM BEACH, FL 33409 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 P  
Name ROLLINS, NANCY C.  
Address 35 WINDSOR LANE  
City-State-Zip: PALM BCH GRDNS FL 33418

Title VP  
Name BRUCE, MITCHELL G JR.  
Address 35 WINDSOR LANE  
City-State-Zip: PALM BCH GRDNS FL 33418

Title VD  
Name ROLLINS, NANCY, C  
Address 35 WINDSOR LANE  
City-State-Zip: PALM BCH GRDNS FL 33418

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

**SIGNATURE:** NANCY C ROLLINS

**OWNER**

**03/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date