

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007683

FILED  
Sep 17, 2010  
Secretary of State

Entity Name: TAAG ACADEMY INC.

**Current Principal Place of Business:**

9329 WELLINGTON PARK CIRCLE  
TAMPA, FL 33647

**New Principal Place of Business:**

2230 ASHLEY OAKS CIRCLE  
SUITE 101  
TAMPA, FL 33544

**Current Mailing Address:**

P.O. BOX 46566  
TAMPA, FL 33646

**New Mailing Address:**

FEI Number: 27-0729387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PD, FLOYD D ARWIN  
9329 WELLINGTON PARK CIRCLE  
TAMPA, FL 33647 US

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

FLOYD, DARWIN E  
9329 WELLINGTON PARK CIRCLE  
TAMPA, FL 33647 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: DARWIN FLOYD

09/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FLOYD, DARWIN E  
Address: 9329 WELLINGTON PARK CIRCLE  
City-St-Zip: TAMPA, FL 33647

Title: VD  
Name: FLOYD, SHERAE M  
Address: 9329 WELLINGTON PARK CIRCLE  
City-St-Zip: TAMPA, FL 33647

Title: SD  
Name: FLOYD, DEJA A  
Address: 9329 WELLINGTON PARK CIRCLE  
City-St-Zip: TAMPA, FL 33647

Title: TD  
Name: FLOYD, PARRY D  
Address: 9329 WELLINGTON PARK CIRCLE  
City-St-Zip: TAMPA, FL 33647

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: SHERAE FLOYD

VD

09/17/2010

Electronic Signature of Signing Officer or Director

Date