2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N22172

Entity Name: UNIVERSAL ACADEMY PRIVATE SCHOOL, INC.

Current Principal Place of Business:

21310 NW 37 AVE
MIAMI GARDENS, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

21310 NW 37 AVE
MIAMI GARDENS, FL 33056 US

New Mailing Address:

FEI Number: 65-0138024 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUMPKIN, MARY A REV DR
21310 NW 37 AVE
MIAMI GARDENS, FL 33056 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: PD ( ) Delete
Name: HUTCHINSON-REDMOND, IRMA
Address: 21310 N. W. 37 AVENUE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D ( ) Delete
Name: TUMPKIN, MARY A DR
Address: 21310 NW 37 AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D ( ) Delete
Name: CAMPBELL, THERESA
Address: 21310 NW 37 AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: S ( ) Delete
Name: PARROTT, DEBORAH
Address: 21310 NW 37 AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: TD ( ) Delete
Name: BOSTON, BEATRICE
Address: 21310 NW 37 AVE
City-St-Zip: MIAMI GARDENS, FL 33056

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

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

Title: D ( ) Change (X) Addition
Name: JOHNSON, STELLA
Address: 21310 N. W. 37 AVENUE
City-St-Zip: MIAMI GARDENS, FL 33056

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

SIGNATURE: IRMA HUTCHINSON-REDMOND P 04/28/2009

Electronic Signature of Signing Officer or Director — Date