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Apr 17 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000002506 (1)

1. Corporation Name

THE ACADEMY FOUNDATION, INC.



Principal Place of Business

Mailing Address

2911 SUNSET WAY
ST. PETE BEACH FL 33706

2911 SUNSET WAY
ST. PETE BEACH FL 33706-4134

3. Date Incorporated or Qualified
05/09/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 P.O. Box 66840

4. FEI Number

59-3377240

Applied For

Not Applicable

22 City & State

27 City & State
St. Petersburg Beach

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country
33736-6840

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FORTUNE, JOAN A
2911 SUNSET WAY
ST. PETE BEACH FL 33706

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME FORTUNE, JOAN A
STREET ADDRESS 2911 SUNSET WAY
CITY-ST-ZIP ST. PETE BEACH FL 33706

1.1 TITLE D Sandi Pearl Change Addition
1.2 NAME 1811 Brightwaters Blvd, NE
1.3 STREET ADDRESS St. Petersburg, FL 33704
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME FORTUNE, JEFFREY
STREET ADDRESS 2911 SUNSET WAY
CITY-ST-ZIP ST. PETE BEACH FL 33706

2.1 TITLE D Jack Painter Change Addition
2.2 NAME 2210 Coffee Pot Blvd, NE
2.3 STREET ADDRESS St. Petersburg, FL 33704
2.4 CITY-ST-ZIP

TITLE D DELETE
NAME EHRlich, CHARLES W
STREET ADDRESS 4699 CENTRAL AVENUE
CITY-ST-ZIP ST. PETE BEACH FL 33713

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME ANDERS, BARBARA
STREET ADDRESS 1841 ALMERIA WAY SOUTH
CITY-ST-ZIP ST. PETE BEACH FL 33712

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D DELETE
NAME ANDERS, ROBERT L
STREET ADDRESS 1841 ALMERIA WAY SOUTH
CITY-ST-ZIP ST. PETE BEACH FL 33712

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director

4-7-97

Date

Daytime Phone # 0050312

CR2E037 (9/96)