

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2003 8:00 am
Secretary of State

02-19-2003 90016 032 ****61.25

DOCUMENT # N96000002506

1. Entity Name

ACADEMY PREP FOUNDATION, INC.



Principal Place of Business

**2301 22ND AVE S
ST PETERSBURG FL 33712
US**

Mailing Address

**P O BOX 530512
ST PETERSBURG FL 33747-0512
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3377240**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ANDREWS, SHERYL H
749 59TH AVENUE
ST. PETE BEACH FL 33706**

7. Name and Address of New Registered Agent

Name

Janet D. Herron

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

1315 Pelican Creek Crossing

City

St. Petersburg

FL

Zip Code

33707

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Janet D. Herron**

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

Janet D. Herron

(NOTE: Registered Agent signature required when reinstating)

02/04/03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **KNOPIK, STEPHEN M**
STREET ADDRESS **P O BOX 25207**
CITY-ST-ZIP **BRADENTON FL 34206**

TITLE **D, T** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE **D, P** ☒ Change ☐ Addition
NAME **Fortune, Jeffrey**
STREET ADDRESS **2805 Sunset Way**
CITY-ST-ZIP **ST Pete Beach, FL 33706**

TITLE **D** ☒ Delete
NAME **EHRICH, CHARLES W**
STREET ADDRESS **4699 CENTRAL AVENUE**
CITY-ST-ZIP **ST. PETE BEACH FL 33713**

TITLE **D, VP** ☐ Change ☒ Addition
NAME **Thomas Sansone**
STREET ADDRESS **15900 Gulf Blvd**
CITY-ST-ZIP **Redington Beach, FL 33708**

TITLE **D** ☒ Delete
NAME **KING, SHAUN**
STREET ADDRESS **411 PERCH STREET**
CITY-ST-ZIP **TAMPA FL 33617**

TITLE **S** ☐ Change ☒ Addition
NAME **Janet D. Herron**
STREET ADDRESS **1315 Pelican Creek Crossing**
CITY-ST-ZIP **St. Petersburg, FL 33707**

TITLE **D** ☒ Delete
NAME **EHRICH, CHARLES**
STREET ADDRESS **4699 CENTRAL AVENUE**
CITY-ST-ZIP **SAINT PETERSBURG FL 33713**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **FORTUNE, JEFFREY L**
STREET ADDRESS **646 BOCA CIEGA ISLE DRIVE**
CITY-ST-ZIP **ST PETERSBURG BEACH FL 33706**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

02/04/03

727-322-0800

CR2E037 (10/02)