

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000057485

Entity Name: FRANCIS XAVIER ACADEMY, INC.

FILED  
Jan 07, 2011  
Secretary of State

**Current Principal Place of Business:**

851 NE 14TH AVENUE  
SUITE 416  
HALLANDALE, FL 33009

**New Principal Place of Business:**

8170 SPRINGTREE ROAD  
BOCA RATON, FL 33496

**Current Mailing Address:**

P.O. BOX 600717  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

P.O. BOX 880325  
BOCA RATON, FL 33488

FEI Number: 65-0968374

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCULLOUGH, STEPHEN D CLA  
2702 WEST OAKLAND PARK BLVD  
SUITE A  
FT. LAUDERDALE, FL 33311 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: D  
Name: WARE, MARGARET B  
Address: P.O. BOX 880325  
City-St-Zip: BOCA RATON, FL 33488

Title: D  
Name: BREIG, DONNA J  
Address: P.O. BOX 880325  
City-St-Zip: BOCA RATON, FL 33488

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: MARGARET BRIEG WARE

D

01/07/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date