FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000042059 (1)

ALL CE	NTRAL FLORIDA SPIRIT A	ACADEMY INC. Mailing Address			
2324 NORTH ORANGE BLOSSOM TRAIL ORLANDO FL 32804		2324 NORTH ORANGE BLOSSOM TRAIL ORLANDO FL 32804		DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualified 05/16/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3391071	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27				5. Certificate of Status Desireo	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curr		30	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
CAE		Out negletores rigorit	10. Hattio alla Cadisos di Lian Halliaisi	oo Ayont	
CARDIN, JOHN A 2324 NORTH ORANGE BLOSSOM TRAIL			81 Name		
ORLANDO FL 32804			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
1	DAMOU I E DEGUT		83		
			24 - 24		
]			84 City	· F	Zip Code
	to the provisions of Sections 607.0 egistered agent, or both, in the Starm familiar with, and accept the obline familiar with and accept the obline familiar with a section of the section	.502 and 607, 1508, Florida Statute ate of Florida. Such change was a ligations of, Section 607,0505, Flo	is, the a ove-named corporate the corporate statutes.	poration submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE	: Registere Agent signature requir	red when reinstating) DATI	E
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME			1.2 NAME		
STREET ADDRESS	2324 N. ORANGE BLOSSOI	M TRAIL	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	Documen	1.4 CITY - ST - ZIP		Change Dadditon
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP		DELETÉ	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		- December 1	3.2 NAME		C. Commigo C. Frontisis
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		<u> </u>
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST- ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		J
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			. 6.2 NAME		į
STREET ADDRESS			6.3 STREET ADDRESS		
CITY ST. 7IP			S.A.CITVST7IP		

14. Thereby 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

2-10-08

FILED

Feb 25 1998 8:00am

Secretary of State