

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001617

FILED
Jan 27, 2009
Secretary of State

Entity Name: AKADEMIC FOUNDATION, INC.

Current Principal Place of Business:

1630 NW 26 TERR.
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1630 NW 26 TERR.
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 02-0572208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARCEY, VICKIE
3891 SIENNA GREENS TERR.
LAUDERHILL, FL 33319 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: CD () Delete
Name: JONES, SYLVIA
Address: 4280 BANYON TRAILS DR.
City-St-Zip: COCONUT CREEK, FL 33073

Title: VD () Delete
Name: HAMIN, AFRAH
Address: 6801 NW 12TH STREET
City-St-Zip: PLANTATION, FL 33313

Title: SD () Delete
Name: NICKLOS, WELCH R
Address: 4907 PELICAN MANOR
City-St-Zip: COCONUT CREEK, FL 33073

Title: TD () Delete
Name: MCCINKLEY, DELORES
Address: 1630 NW 26 TERR.
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: ATD () Delete
Name: MCCUTCHEON, ROSALIND
Address: 720 SW 3RD CT.
City-St-Zip: DANIA, FL 33004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: JONES, SYLVIA
Address: 4280 BANYON TRAILS DR.
City-St-Zip: COCONUT CREEK, FL 33073

Title: CD (X) Change () Addition
Name: HAMIN, AFRAH
Address: 6801 NW 12TH STREET
City-St-Zip: PLANTATION, FL 33313

Title: SD (X) Change () Addition
Name: JOHNSON, LYNETTE
Address: 927 RIVERSIDE DRIVE, UNIT 310
City-St-Zip: CORAL SPRINGS, FL 33071

Title: TD (X) Change () Addition
Name: CHESTER, ANNIE S
Address: 2831 N W 173 TERRACE
City-St-Zip: MIAMI, FL 33056

Title: ATD (X) Change () Addition
Name: RIDER, CYNTHIA A
Address: 55 NE 212 STREET
City-St-Zip: MIAMI, FL 33179

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: SYLVIA JONES

VD

01/27/2009

Electronic Signature of Signing Officer or Director

Date