

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001617

Entity Name: AKADEMIC FOUNDATION, INC.**Current Principal Place of Business:**3181 NW 5 STREET
LAUDERHILL, FL 33311**Current Mailing Address:**P. O. BOX 101231
FT. LAUDERDALE, FL 33310 US**FEI Number:** 02-0572208**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WEBB, SHARONDA
3181 NW 5 STREET
LAUDERHILL, FL 33311 US*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:** SHARONDA WEBB

01/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FLOYD, JEANNIE
Address 5169 CHARDONNAY DRIVE
City-State-Zip: CORAL SPRINGS FL 33067

Title VP
Name THOMAS, RAYLENE
Address 1686 NW 56TH AVE
City-State-Zip: LAUDERHILL FL 33313

Title ASST. TREASURER
Name PATTERSON, ANTOINETTE
Address 19422 NW 11 STREET
City-State-Zip: PEMBROKE PINES FL 33029

Title TD
Name WEBB, SHARONDA
Address 3181 NW 5TH STREET
City-State-Zip: LAUDERHILL FL 33311

Title SECRETARY
Name DEJESUS, DESTINY
Address 3578 NW 13 STREET
City-State-Zip: LAUDERHILL FL 33311

Title ASST. SECRETARY
Name LOCKHART-TALLEY, TRACY
Address 1200 SW 31 AVENUE
City-State-Zip: FORT LAUDERDALE FL 33312

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARONDA STRIGGLES-WEBB**TREASURER**

01/25/2019

Electronic Signature of Signing Officer/Director Detail

Date