

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002560

Entity Name: PRECIOUS JEWELS ACADEMY LEARNING CENTER, INC.

Current Principal Place of Business:

3057 31ST WAY
SARASOTA, FL 34234

FILED
May 01, 2019
Secretary of State
8713040779CC

Current Mailing Address:

P. O. BOX 3085
SARASOTA, FL 34230

FEI Number: 73-1685567

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATHIS, ANGELA C
3057 31ST WAY
SARASOTA, FL 34234 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D P
Name MATHIS, ANGELA C
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title D
Name CAMPBELL, CELESTINE
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title D VP
Name GIBBONS, ARCHIE JR.
Address 710 LEE STREET
City-State-Zip: KISSIMMEE FL 34741

Title COO
Name CAMPBELL, LEON
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title CFO
Name WHITE, ANGELA
Address 2550 22ND STREET
City-State-Zip: SARASOTA FL 34234

Title EXECUTIVE SECRETARY
Name GIBBONS, CAROLYN L
Address 3057 31ST WAY
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name GIBBONS, EVELYN R
Address 3057 31ST WAY
City-State-Zip: SARASOTA FL 34234

Title COO
Name CROCKETT, MICHELE
Address 1300 MANATEE AVENUE EAST
City-State-Zip: BRADENTON FL 34208

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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: ANGELA MATHIS

PRESIDENT

05/01/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GIBBONS, VICTOR
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title OFFICER
Name MARTINEZ, MARISOL
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title OFFICER
Name ALICIA, PHILLIPS
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title OTHER
Name BAKER, KING
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title OTHER
Name PAIGE, MIA
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230

Title ASST. SECRETARY
Name SMITH, GAIL
Address P. O. BOX 3085
City-State-Zip: SARASOTA FL 34230