#### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002560

Entity Name: PRECIOUS JEWELS ACADEMY LEARNING CENTER, INC.

FILED Apr 30, 2023 Secretary of State 2451605778CC

## **Current Principal Place of Business:**

3026 31ST WAY SARASOTA, FL 34234

### **Current Mailing Address:**

P. O. BOX 3085

SARASOTA, FL 34230

FEI Number: 73-1685567 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

MATHIS, ANGELA C 5001 N WASHINGTON BLVD, SARASOTA, FL34234 SARASOTA, FL 34234-4128 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 Title D VP

NameMATHIS, ANGELA CNameGIBBONS, ARCHIE JR.AddressP. O. BOX 3085Address619 LEE STREETCity-State-Zip:SARASOTA FL 34230City-State-Zip:KISSIMMEE FL 34741

Title COO Title CFO

 Name
 CAMPBELL, LEON
 Name
 WHITE, ANGELA

 Address
 P. O. BOX 3085
 Address
 2550 22ND STREET

 City-State-Zip:
 SARASOTA FL 34230
 City-State-Zip:
 SARASOTA FL 34234

Title EXECUTIVE SECRETARY Title COO

Name GIBBONS, CAROLYN L Name CROCKETT, MICHELE

Address 710 LEE STREET Address 1300 MANATEE AVENUE EAST

City-State-Zip: KISSIMMEE FL 34741 City-State-Zip: BRADENTON FL 34208

Title **OTHER** Title ASST. SECRETARY HALL, DIANE Name SMITH, GAIL Name P.O. BOX 1283 Address Address P. O. BOX 3085 City-State-Zip: PALMETTO FL 34220 SARASOTA FL 34230 City-State-Zip:

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## Continues on page 2

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 04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title OTHER

Name MATHIS, RONALD Address P.O. BOX 3085

City-State-Zip: SARASOTA FL 34230