

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000009517

**Entity Name:** SCHOLARS CHILDREN ACADEMY INC.

**Current Principal Place of Business:**

2610 MICHIGAN AVE  
PENSACOLA, FL 32526

**Current Mailing Address:**

2610 MICHIGAN AVE  
PENSACOLA, FL 32526

**FEI Number: 27-4533220**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ATKINS JACKSON, DEBORAH  
2610 MICHIGAN AVE  
PENSACOLA, FL 32526 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 DP  
Name ATKINS JACKSON, DEBORAH  
Address 2610 MICHIGAN AVE  
City-State-Zip: PENSACOLA FL 32526

Title COCH  
Name HERRING, JOSEPH L  
Address 1603 NORTH 58TH AVE.  
City-State-Zip: PENSACOLA FL 32506

Title T  
Name ATKINS, DEUNDRE  
Address 200 EMERALD AVENUE  
City-State-Zip: PENSACOLA FL 32505

Title OF  
Name FORD, BRIDGETTE  
Address 1280 OLD CHURCH ROAD  
City-State-Zip: CHIPLEY FL 32428

Title OFFICER  
Name JACKSON, ROBERT  
Address 5701 TONAWANDA DRIVE  
City-State-Zip: PENSACOLA FL 32506

*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: DEUNDRE ATKINS**

**TREASURER**

**05/01/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date