

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED

FILED

COMPROBATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. McArthur
GOVERNOR
TALLAHASSEE, FLORIDA 32304

03 MAY - 11 10:07

DOCUMENT # 574277

(0)

1. Corporation Name

JULIE ROHR ACADEMY, INC.

03 MAY - 11 10:07

Principal Office Address: **4466 FRUITVILLE ROAD SARASOTA FL 34232**
Mailing Address: **4466 FRUITVILLE ROAD SARASOTA FL 34232**

2. Filing Date of Report		2a. Filing Address		3. Date the Corporation was chartered		3a. Date of Last Report	
21		26		07/01/1978		07/26/1994	
22		27		4. Filing Number		Applied For	
23		28		59-1825018		Not Applicable	
24		29		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
25		30		6. Election Campaign Contribution Fund Contribution		\$5.00 May Be Added to Fees	
26		31		7. Does the Corporation have any outstanding debt under the Florida Statutes?		Yes ☒ No ☐	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ROHR, JULIA R. 4466 FRUITVILLE ROAD SARASOTA FL 34232				81. Name			
				82. Street Address (P.O. Box Number, if Applicable)			
				83. City			
				84. State			
				FL 85. Zip Code			

11. I, the undersigned, being duly sworn, depose and say that I am a resident of the State of Florida, and I am the duly authorized representative of the Corporation named herein, and I hereby accept the appointment as registered agent of the Corporation named herein, and I hereby accept the appointment as registered agent of the Corporation named herein.

SIGNATURE: *Julie W. Rohr* 4/28/95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P. MCHUGH, JULIE R. 4466 FRUITVILLE RD. SARASOTA FL	NAME	☐ Change ☐ Addition
ADDRESS	V. ROHR, JULIA W. 4466 FRUITVILLE RD. SARASOTA FL	NAME	☐ Change ☐ Addition
NAME	ST. MCHUGH, MICHAEL 4466 FRUITVILLE RD. SARASOTA FL	NAME	☐ Change ☐ Addition
ADDRESS		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is substantially true and correct, and I hereby certify that the information supplied with this filing is substantially true and correct, and I hereby certify that the information supplied with this filing is substantially true and correct.

SIGNATURE: *Julie Rohr McHugh* Julie Rohr McHugh 4/28/95 813 311-4979