

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90001 044 ****70.00



DOCUMENT # 740309
 1. Entity Name
SPIRITUAL ACADEMY, INC.

Principal Place of Business
 8316 N. CORAL CIRCLE
 N. LAUDERDALE, FL 33068 US

Mailing Address
~~8316 N. CORAL CIRCLE~~
~~N. LAUDERDALE, FL 33068 US~~
 11767 NW 48 St.
 Coral Springs, FL 33076

9009012



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 11767 NW 48 St.
 Suite, Apt. #, etc.

02212008 Chg-NP CR2E037 (12/06)

City & State
 Coral Springs

4. FEI Number
 NOT APPLICABLE

Applied For
 Not Applicable

Zip Country
 FL USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SPAGNARDI, MARIO
 8316 N. CORAL CIRCLE
 N. LAUDERDALE, FL 33068

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	SPAGNARDI, MARIO	8316 N. CORAL CIRCLE	N. LAUDERDALE, FL	<input type="checkbox"/>
V	SPAGNARDI, PATRIZIO	7007 N.W. 81ST STREET	TAMARAC, FL	<input type="checkbox"/>
S	ABRAHAM, KATHLEEN	8010 N.W. 74TH TERRACE	CORAL SPRING, FL	<input type="checkbox"/>
D	PRESTON, JEANNE	8437 S. CORAL CIR.	N. LAUDERDALE, FL	<input type="checkbox"/>
T	CONCETTA, LASHURE	830 S.W. 49TH TERRACE	MARGATE, FL 33068	<input type="checkbox"/>
D	ABBONDANZIO, ESTIA	6812 NW 2 ST	MARGATE, FL 33063	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S	Kathleen H. Abraham	11767 NW 48 St	Coral Springs, FL 33076	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mario Spagnardi* **3-14-08-9546961957**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #