


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000002499	
1. Entity Name LOOK AT THE FUTURE ACADEMY, INC.	

Principal Place of Business 12601 N.W. 27 AVE T-328 MIAMI, FL 33167	Mailing Address 12601 NW 27 AVE T328 MIAMI, FL 33167
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent KINSEY, WALTER 12601 N.W. 27 AVE T-328 MIAMI, FL 33167	DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE
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Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KINSEY, SENECA T MR. 15004 WEST LYN AVE CLANTON, FL 35045
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KINSEY, WALTER MR. 12601 NW 27 AVE. T-328 MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KINSEY, LAMAR MR. 1777 N.W. 152 ST MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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.
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FILED

07 AUG -8 AM 10: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA *RS*



08012007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-1095728	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE
IN THIS SPACE

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 6 2007

Date

Daytime Phone #