2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004922

FILED Jul 06, 2009 Secretary of State

D 0 0 0 1.	//LITT# 110100000 1022	ocorciary or orac
Entity Na	me: LIBERTAS ACADEMY, INC.	
Current P	Principal Place of Business:	New Principal Place of Business:
17538 LIV LUTZ, FL	INGSTON AVE. 33549	8610 TEMPLE TERRACE HWY TAMPA, FL 33617
Current N	lailing Address:	New Mailing Address:
6723 MAY TAMPA, F	BOLE PLACE L 33617	
	r: 59-3731708 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation d	FEI Number Not Applicable () Certificate of Status Desired () d not receive the prior notice.
Name and	d Address of Current Registered Agent	: Name and Address of New Registered Agent:
611 FAIRN PLANT CI	MARIANNA WAY COURT TY, FL 33565 US e named entity submits this statement for t	he purpose of changing its registered office or registered agent, or both,
in the Stat	e of Florida.	
SIGNATU	RE:	
	Electronic Signature of Registered	Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () Delete CLARKE, MARIANNA 611 FAIRWAY COURT PLANT CITY, FL 33565	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete VICKERY, HANNAH 6723 MAYBOLE PLACE TAMPA, FL 33617	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete STRECTER, YOLANDA 4220 LA SALLE ST. TAMPA, FL 33607	Title: D (X) Change () Addition Name: STREETER, YOLANDA Address: 4220 LA SALLE ST. City-St-Zip: TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HANNAH VICKERY DR 07/06/2009