

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006406

FILED
Sep 08, 2004
Secretary of State**Entity Name:** LAUDERDALE LAKES ACADEMY, INC.**Current Principal Place of Business:**3200 WEST OAKLAND PARK BLVD
ATTN: RON ISHOY
LAUDERDALE LAKES, FL 333111245**New Principal Place of Business:****Current Mailing Address:**3200 WEST OAKLAND PARK BLVD
ATTN: RON ISHOY
LAUDERDALE LAKES, FL 333111245**New Mailing Address:****FEI Number:** 65-1150274**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BOWER, TANYA L ESQ
C/O TRIPP SCOTT PA
110 SE 6TH STREET 15TH FLOOR
FORT LAUDERDALE, FL 33301 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: ISHOY, RONALD N
Address: 3200 WEST OAKLAND PARK BLVD
City-St-Zip: LAUDERDALE LAKES, FL 333111245**Title:** D () Delete
Name: LEVY, ALAN
Address: 3200 WEST OAKLAND PARK BLVD
City-St-Zip: LAUDERDALE LAKES, FL 333111245**Title:** D () Delete
Name: DUMONT, PATRICIA
Address: 3200 WEST OAKLAND PARK BLVD
City-St-Zip: LAUDERDALE LAKES, FL 333111245**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RONALD N. ISHOY

D

09/08/2004

Electronic Signature of Signing Officer or Director

Date