

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
8/7/2003-90121-037-\$61.25-\$61.25
03 OCT 16 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000007092

1. Entity Name
ACADEMY FOR TECHNOLOGY, INC.



Principal Place of Business
13246 38TH STREET NORTH
CLEARWATER FL 33762

Mailing Address
13246 38TH STREET NORTH
CLEARWATER FL 33762

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FBI Number

56-2301954

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLIDES, FRITZIE S PRES
13246 38TH STREET
CLEARWATER FL 33762

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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 P
NAME FLIDES, FRITZIE S PRES
STREET ADDRESS 13246 38TH STREET NORTH
CITY- ST- ZIP CLEARWATER FL 33762

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE REQUIRED

Fritz Frides

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)

9/10/20

DIANA FINK

**13246 38th Street North
Clearwater, FL 33762
(727) 540-0005**

September 17, 2003

TO WHOM IT MAY CONCERN:

I forwarded and paid for the renewal of two different corporations which are enclosed. We received a letter back indicating that you needed our FEIN number, which we wrote on the documents and returned.

I diaried my files to be sure they were processed and I see. I have since learned that they have not been renewed.

Once again, I am forwarding the copies for your assistance. Please advise once the processing has been completed.

Thank you for your assistance.

Sincerely,



Diana Fink