2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009850

FILED Mar 24, 2008 Secretary of State

Entity Name: MCKEEL ELEMENTARY ACADEMY, INC.

	Principal Place of Business:	New Principal Place of Business:
	ORIDA AVENUE D, FL 33801	
urrent N	lailing Address:	New Mailing Address:
	ARKER STREET D, FL 33815	
El Number	r: 14-1865029 FEI Number Applied Fo	or () FEI Number Not Applicable () Certificate of Status Desired (
lame and	d Address of Current Registered A	gent: Name and Address of New Registered Agent:
810 W P.	Y, HAROLD ARKER STREET D, FL 33815 US	
	e named entity submits this statement e of Florida.	for the purpose of changing its registered office or registered agent, or
SIGNATU	RE:	
	Electronic Signature of Registe	ered Agent Date
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRE
tle: ame: ddress: ity-St-Zip:	TP () Delete MAREADY, HAROLD 1810 W PARKER STREET LAKELAND, FL 33815	Title: () Change () Addition Name: Address: City-St-Zip:
tle:	TC () Delete MCKEEL, SETH 2000 EDGEWOOD DRIVE	Title: () Change () Addition Name: Address:
ame: ddress: ity-St-Zip:	LAKELAND, FL 33803	City-St-Zip:
ddress:		City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:
ddress: ity-St-Zip: tle: ame: ddress:	LAKELAND, FL 33803 ST () Delete WEST, DEBI 1810 W PARKER STREET	Title: () Change () Addition Name: Address:
ddress: ity-St-Zip: tte: ame: ddress: ity-St-Zip: tte: ame: ddress:	LAKELAND, FL 33803 ST () Delete WEST, DEBI 1810 W PARKER STREET LAKELAND, FL 33815 D () Delete JACKSON, CAROLYN 1810 W PARKER STREET	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: DEBI WEST ST 03/24/2008