

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000008181

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** ATHENIAN ACADEMY OF PASCO COUNTY, INC.

**Current Principal Place of Business:**

3118 SEVEN SPRINGS BLVD.  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

3118 SEVEN SPRINGS BLVD.  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

**FEI Number:** 20-4983529

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MATHIEU, JAMES PD  
7710 GRAND BLVD.  
PORT RICHEY, FL 34668 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:** PD  
**Name:** MATHIEU, JAMES PD  
**Address:** 7710 GRAND BLVD.  
**City-St-Zip:** PORT RICHEY, FL 34668 US

**Title:** VPD  
**Name:** ALLEN, RAY VPD  
**Address:** 5515 FOREST HILLS DR.  
**City-St-Zip:** HOLIDAY, FL 34690 US

**Title:** DST  
**Name:** LINDA, HOLLY DST  
**Address:** 5403 SALTAMONTE DR.  
**City-St-Zip:** NEW PORT RICHEY, FL 34655 US

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES MATHIEU

PD

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date