

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003705

FILED
Apr 14, 2011
Secretary of State

Entity Name: PROVIDENCE ACADEMY, INC.

Current Principal Place of Business:

7605 CONROY
WINDERMERE, FL 32835

New Principal Place of Business:

Current Mailing Address:

1561 SOUTH ALAFAYA TRAIL, STE 200
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 73-1700973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRACCIA, ALICIA
1561 SOUTH ALAFAYA TRAIL, STE 200
ORLANDO, FL 32828 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
Name: BRACCIA, ALICIA
Address: 986 CHERRY BRANCH CT
City-St-Zip: HEATHROW, FL 32746

Title: D
Name: NAWROCKI, CYNTHIA
Address: 305 E. CRISTAL DR
City-St-Zip: SANFORD, FL 32773

Title: D
Name: MAHAFFEY, JACK
Address: 2461 W. STATE RD. 426, STE 1001
City-St-Zip: OVIEDO, FL 32765

Title: D
Name: ENGLERT, JENNIFER
Address: 1561 S. ALAFAYA TRAIL, #200
City-St-Zip: ORLANDO, FL 32828

Title: D
Name: LOVEGREEN, VALERIE
Address: 14661 LONE EAGLE DR
City-St-Zip: ORLANDO, FL 32837

Title: D
Name: TOM, DELGROSSO
Address: 8910 CONROY-WINDERMERE ROAD
City-St-Zip: ORLANDO, FL 32835

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: CYNTHIA NAWROCKI

TRES

04/14/2011

Electronic Signature of Signing Officer or Director

Date