2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 23, 2005
Secretary of State

DOCUMENT# N04000009420

Entity Name: ST. MICHAEL'S ACADEMY, INC.

Current Principal Place of Business:

780 FISHERMAN STREET
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

780 FISHERMAN STREET
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 05-0609703 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FREEMAN, MICHAEL
780 FISHERMAN STREET
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

DONALD, S D
780 FISHERMAN STREET
OPA LOCKA, FL 33054 US

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: S D DONALD 10/23/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: FREEMAN, MICHAEL
Address: 780 FISHERMAN STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: VT ( ) Delete
Name: STUART, NELSON
Address: 780 FISHERMAN STREET
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: DONALD, S D
Address: 780 FISHERMAN STREET
City-St-Zip: OPA LOCKA, FL 33054

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: S D DONALD PS 10/23/2005
Electronic Signature of Signing Officer or Director Date