2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 04, 2008
Secretary of State

DOCUMENT# N04000010591

Entity Name: LAWRENCE ACADEMY, INC.

Current Principal Place of Business:

777 W PALM DRIVE
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

14319 SW 166TH STREET
MIAMI, FL 33177

New Mailing Address:

FEI Number: 47-0946984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURNETT, MICHAEL
777 W PALM DRIVE
FLORIDA CITY, FL 33034 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: MICHAEL D. BURNETT
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SANTIESTEBAN, SOFIA
Address: 6900 SW 69 AVENUE
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete
Name: PEARSON, LULA
Address: 19471 SW 134TH COURT
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete
Name: RAHEEM, LYNDA
Address: 12013 SW 110TH STREET
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: KING, ALTHEA
Address: 12325 SW 147TH TERRACE
City-St-Zip: MIAMI, FL 33135

Title: D ( ) Delete
Name: GARCIA, CHRISTINA
Address: 33501 S DIXIE HWY
City-St-Zip: FLORIDA CITY, FL 33034

Title: CEO ( ) Delete
Name: BURNETT, KEITH DR
Address: 14319 SW 166TH ST
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CEO (X) Change ( ) Addition
Name: BURNETT, KEITHA DR
Address: 14319 SW 166TH ST
City-St-Zip: MIAMI, FL 33177

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: KEITHA D. BURNETT DR, 10/04/2008
Electronic Signature of Signing Officer or Director — Date