2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008
Secretary of State

DOCUMENT# N06000009321

Entity Name: FLORIDA INTERCULTURAL ACADEMY-MIDDLE, INC.

Current Principal Place of Business:

1704 BUCHANAN ST.
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

1704 BUCHANAN ST.
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 20-5997290 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PURCELL, GWENDOLYN
1704 BUCHANAN ST.
HOLLYWOOD, FL 33020 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 ( ) Delete
Name: PURCELL, GWENDOLYN
Address: 1704 BUCHANAN ST.
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete
Name: WEAVER, ELIZABETH
Address: 13003 SW 21 ST.
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: DUPREE, ANGELA
Address: 16358 MARIPOSA CIR. SOUTH
City-St-Zip: FT. LAUDERDALE, FL 33331

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D ( ) Change (X) Addition
Name: HARRIS, KIMBERLY
Address: 3411 WATER OAK DRIVE
City-St-Zip: HOLLYWOOD, FL 33021

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: GWENDOLYN PURCELL DR. 02/08/2008

Electronic Signature of Signing Officer or Director — Date