## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000010247

Address:

City-St-Zip:

3765 SUGAR CREEK

TAMPA, FL 33619

Entity Name: PADAH'S ACADEMY, INC.

FILED May 27, 2008 Secretary of State

Littly Na	ME. PADATTS ACADEMIT, INC.			
Current P	rincipal Place of Business:	New Principal Place	of Business:	
8319 CAN TAMPA, F	ITERBURY LAKE BLVD. IL 33619			
Current N	lailing Address:	New Mailing Addres	New Mailing Address:	
P.O.BOX 8 TAMPA, F				
	nce with s. 607.193(2)(b), F.S., the corporation did		Certificate of Status Desired ( )	
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
	ODETTA WARD AVENUE D, FL 33815 US			
	e named entity submits this statement for the e of Florida.	e purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete WHITE, MARY DR. 8319 CANTERBURY LAKE BLVD. TAMPA, FL 33619	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( ) Delete WHITE, JERALD 8319 CANTERBURY LAKE BLVD. TAMPA, FL 33619	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SECD () Delete DYSERT, ODETTA 404C HOWARD AVENUE LAKELAND, FL 33815	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete ADEWUMI, ADEWALE DR. 8319 CANTERBURY LAKE BLVD TAMPA, FL 33619	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D () Delete ADAMS, GARY	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MARY WHITE D 05/27/2008