

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0800000524

FILED  
Feb 28, 2010  
Secretary of State

**Entity Name:** LIFELONG LEARNING ACADEMY, INC.

**Current Principal Place of Business:**

8350 NORTH TAMIAMI TRAIL  
#A124  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 826  
TALLEVAST, FL 34270

**New Mailing Address:**

FEI Number: 26-2772186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAYNE, DAVID W  
240 SOUTH PINEAPPLE AVE SUITE 401  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

WILLIAMSPARKER  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 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: SUSAN BARRETT HECKER

02/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR  
Name: MAHON, MIKE PRES.  
Address: 13405 MONTCLAIR PL  
City-St-Zip: LAKEWOOD RANCH, FL 34202 US

Title: MR  
Name: GROSS, SAM V.P.  
Address: 11019 HYACINTH PLACE  
City-St-Zip: BRADENTON, FL 34202 US

Title: MR  
Name: GARNHAM, JOSE TREAS  
Address: 4371 OAK VIEW DRIVE  
City-St-Zip: SARASOTA, FL 34232 US

Title: MRS  
Name: HUSSEY, MARIA ED  
Address: P.O BOX 826  
City-St-Zip: TALLEVAST, FL 34279 US

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: MIKE MAHON

PRES

02/28/2010

Electronic Signature of Signing Officer or Director

Date