

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000010310

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** MONROE MYCROSCHOOL OF INTEGRATED ACADEMICS AND TECHNOLOGIES, INC.

**Current Principal Place of Business:**

20901 SW 127 CT.  
MIAMI, FL 33177

**New Principal Place of Business:**

580 BATTEN BOULEVARD  
PENSACOLA, FL 32507

**Current Mailing Address:**

20901 SW 127 CT.  
MIAMI, FL 33177

**New Mailing Address:**

580 BATTEN BOULEVARD  
PENSACOLA, FL 32507

**FEI Number:** 27-4660462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIETZEN, LEONARD J III  
215 SOUTH MONROE STREET, SUITE 130  
TALLAHASSEE, FL 323017721 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  
Name: HOCKER, TAMI LYNN TREAS  
Address: 9110 WOOD DOVE DRIVE  
City-St-Zip: BRADENTON, FL 34202

Title: D  
Name: LOPEZ, MARJORIE SECR  
Address: 580 BATTEN BOULEVARD  
City-St-Zip: PENSACOLA, FL 32507

Title: D  
Name: STARLING, KENNETH R PRES  
Address: 16560 SW 144TH AVENUE  
City-St-Zip: BROOKER, FL 32622

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: MARJORIE LOPEZ

SECR

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date