## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000837

FILED Mar 18, 2008 Secretary of State

Entity Name: FLORIDA LEARNING ACADEMY PRIVATE SCHOOL, INC.

**New Principal Place of Business: Current Principal Place of Business:** 5993 COKER AVENUE COCOA, FL 32927 **Current Mailing Address: New Mailing Address:** 5993 COKER AVENUE COCOA, FL 32927 FEI Number: 59-3166860 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RHAME, THERESA A 5993 CÓKER AVENUE COCOA, FL 32927 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RHAME, THERESA A Name: Name: 5993 COKER AVENUE Address: Address: City-St-Zip: COCOA, FL 32927 City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition Name: PULVER, CAROL Name: GEORGE, LEEANN Address: 21 VOLUSIA DRIVE Address: 1118 W PASCO AVE City-St-Zip: DEBARY, FL 32713 City-St-Zip: COCOA BEACH, FL 32931 Title: () Delete Title: (X) Change ( ) Addition GEORGE, LEE ANN CALLAHAN, LAURA Name: Name: 118 W. PASCO LANE 4260 CITRUS BLVD Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA, FL 32922 Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: WELDON, SHANNON Name: LYNCH, LAWRENCE 4255 CURTIS BLVD Address: 460 MONITOR ST. Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: COCOA, FL 32927

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: THERESA A RHAME PD 03/18/2008