

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000837

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Entity Name:** FLORIDA LEARNING ACADEMY PRIVATE SCHOOL, INC.

**Current Principal Place of Business:**

460 ROBIN HOOD DR  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

460 ROBIN HOOD DR  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

**FEI Number:** 59-3166860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RHAME, THERESA A  
460 ROBIN HOOD DR  
MERRITT ISLAND, FL 32953 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:** PD  
**Name:** RHAME, THERESA A  
**Address:** 460 ROBIN HOOD DR  
**City-St-Zip:** MERRITT ISLAND, FL 32953

**Title:** VD  
**Name:** GEORGE, LEEANN  
**Address:** 1118 W PASCO AVE  
**City-St-Zip:** COCOA BEACH, FL 32931

**Title:** TD  
**Name:** LYNCH, DONALD  
**Address:** 5037 BRIDGE RD  
**City-St-Zip:** COCOA, FL 32927

**Title:** SD  
**Name:** LYNCH, LAWRENCE  
**Address:** 4255 CURTIS BLVD  
**City-St-Zip:** COCOA, FL 32927

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:** THERESA A. RHAME

PD

05/02/2012

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

\_\_\_\_\_  
Date