

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002128

FILED
Mar 08, 2008
Secretary of State

Entity Name: BEREAN ACADEMY, INC.

Current Principal Place of Business:

10948 CENTRAL AVE N
TAMPA, FL 33612

New Principal Place of Business:

17951 US HWY 41 N
LUTZ, FL 33549

Current Mailing Address:

10948 CENTRAL AVE N
TAMPA, FL 33612

New Mailing Address:

17951 US HWY 41 N
LUTZ, FL 33549

FEI Number: 59-3321690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRITTAIN, DAVID R
101 E. KENNEDY BLVD.
SUITE 2700
TAMPA, FL 33602 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: T () Delete
Name: ARMSTRONG, JEFFREY
Address: 16407 ZURRAQUIN DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: P () Delete
Name: CRANE, THOMAS
Address: 502-B W. FLETCHER
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: BRITTAIN, DAVID
Address: 468 LUCERNE AVENUE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: SHELL, DAVID
Address: 828 S. BAYSIDE DRIVE
City-St-Zip: TAMPA, FL 33609

Title: VP () Delete
Name: TAYLOR, TATE
Address: 101 E KENNEDY BLVD STE 2700
City-St-Zip: TAMPA, FL 33602

Title: S (X) Delete
Name: SUDDATH, JANITH
Address: 1808 W. BEARSS AVENUE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TATE TAYOR

VP

03/08/2008

Electronic Signature of Signing Officer or Director

Date