FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 14 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

N97000007139 (5) DOCUMENT

SOUTH FLORIDA ACADEMY OF LEARNING, INC.

Principal Place of Business Mailing Address 4640 N.W. 74TH PLACE 4640 N.W. 74TH PLACE 3. Date Incorporated or Qualified **COCONUT CREEK FL 33073** COCONUT CREEK FL 33073 12/24/1997 4. FEI Number Applied For Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes <u>□</u> 100 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MAISANO, ANTHONY 82 Street Address (P.O. Box Number is Not Acceptable) 4840 N.W. 74TH PLACE **COCONUT CREEK FL 33073** 83 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE MAISANO, MARYANNE NAME 1.2 NAME 4640 N.W. 74TH PLACE STREET ADDRESS 1.3 STREET ADDRESS COCONUT CREEK FL 33073 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MAISANO, ANTHONY 2.2 NAME 4640 N.W. 74TH PLACE STREET ADDRESS 2.3 STREET ADDRESS **COCONUT CREEK FL 33073** CITY-ST-ZIP 2.4 City-St-ZiP ■ DELETE 3.1 TITLE Change ☐ Addition TITLE **B**ARCA, JENNIE NAME 3.2 NAME 4640 N.W. 74TH PLACE STREET ADDRESS 3.3 STREET ADDRESS COCONUT CREEK FL 33073 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP