2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State
06-08-2000 90431 017 ****70.00

DOCUMENT # N98000000583

1. Entity Name

EMPOWERING YOUNG MINDS ACADEMY, INC.

Principal Place of Business	Mailing Address
5258-12 NORWOOD AVE JACKSONVILLE FL 32208	5258-12 NORWOOD AVE JACKSONVILLE FL 32208-5097

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5258-12 Norwood Ave	5258-12 Norwood Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, FL	City & State: Jacksonville, FL
Zip: 32208 Country: USA	Zip: 32208 Country: USA

4. FEI Number: 59-3469667 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~MITCHELL~~, JACQUELINE Maddox 5258-12 NORWOOD AVE JACKSONVILLE FL 32208	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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: Jacqueline Maddox Jacqueline Maddox
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM NEIL, PAMELA L 9213 MADISON AVE JACKSONVILLE FL 32208 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Board Member Willie McCullough 5258-12 Norwood Ave Jacksonville, FL 32208 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM COATES, DEBORAH 5258-12 NORWOOD AVE JACKSONVILLE FL 32208 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM Vice Chair Anthony Williams 5258-12 Norwood Ave Jacksonville, FL 32208 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTC Chairperson ~~MITCHELL~~, JACKIE maddox 2304 ROGERO RD. JACKSONVILLE FL 32211 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Board Member Jenny West 2999 Edison Ave Jax, Fla 32254 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FUNCHES, BARBARA (Ex-Officio) No voting power 5258-12 NORWOOD AVE JACKSONVILLE FL 32208 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM Rosemary Anderson 5258-12 Norwood Ave Jacksonville, FL 32208 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Secretary-Treasurer ~~GUNDIS~~, EMMA Curtis 274 S MCDUFF AVE JACKSONVILLE FL 32208 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM Isiah Rumlin 5258-12 Norwood Ave Jacksonville, FL 32208 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BATTLE, ALFRED 5258-12 NORWOOD AVE JACKSONVILLE FL 32208 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM Marlon Robinson [illegible] Rogero Rd Jacksonville, FL 32208 Resigned ☒ Change ☐ Addition

CR2E037 (9/99)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jacqueline Maddox Jacqueline Maddox Chairperson 904/924-7748
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #