## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000001693

FILED Mar 10, 2011 Secretary of State

Entity Name: PIERIAN SPRING ACADEMY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1188 N. TAMIAMI TRAIL 1750 17TH STREET

BLDG. L2 #504

SARASOTA, FL 34236 SARASOTA, FL 34234-869 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 110141 P.O. BOX 110141

LAKEWOOD RANCH, FL 34211 LAKEWOOD RANCH, FL 34211-000 US US

FEI Number: 65-0836977 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CARLSON, ROBERT V 1188 N. TAMIAMI TRAIL #504 SARASOTA, FL 34236 US

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: Date

Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:** 

Name:

CARLSON, ROBERT V Address: 1188 N. TAMIAMI TRAIL #504 City-St-Zip: SARASOTA, FL 34236

Title:

Name: LEVIN, BARRY MD Address: 1729 CHEROKEE DRIVE City-St-Zip: SARASOTA, FL 34239

Title: SEC

CAROL, GALLOTA Name: Address: 1540 LEISURE DR. N21 City-St-Zip: BRADENTON, FL 34235

Title:

Name: DEGENARO, MARY JANE 1225 N. GULFSTREAM AVE Address: City-St-Zip: SARASOTA, FL 34236

Title:

ELLIN, LEON R Name:

401 S PALM AVE UNIT 502 Address: City-St-Zip: SARASOTA, FL 34236

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: LEON R ELLIN TR 03/10/2011