

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004262

FILED
Apr 21, 2009
Secretary of State

Entity Name: MATER ACADEMY, INC.

Current Principal Place of Business:

7901 NW 103RD ST
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

Current Mailing Address:

6255 BIRD RD
MIAMI, FL 33155

New Mailing Address:

6361 SUNSET DRIVE
MIAMI, FL 33143

FEI Number: 65-0857507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
SUITE 4
WESTON, FL 33331 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: DCP () Delete
Name: ROCA, ANTONIO
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 600
City-St-Zip: MIAMI, FL 33133

Title: V () Delete
Name: RIERA, BEATRIZ
Address: 458 SW 4 STREET
City-St-Zip: MIAMI, FL 33131

Title: V () Delete
Name: GUILARTE, KIM
Address: 1700 NW 98 STREET
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: D () Delete
Name: SADESKY, SHANNIE
Address: 506 SW 19TH ST
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: V () Delete
Name: MARRERO, LOURDES
Address: 9010 NW 178TH LANE
City-St-Zip: HIALEAH, FL 33018

Title: V () Delete
Name: MARTY, JUDITH
Address: 7901 NW 103RD ST
City-St-Zip: HIALEAH GARDENS, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: BLANCH, ROBERTO
Address: 201 ALHAMBRA CIRCLE STE 1102
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: NUEVO, ELIZABETH
Address: 10181 NW 58 STREET
City-St-Zip: MIAMI, FL 33178

Title: D (X) Change () Addition
Name: GARCIA, JUAN
Address: 18803 NW 89 AVENUE
City-St-Zip: HIALEAH, FL 33018

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: ANTONIO ROCA

DCP

04/21/2009

Electronic Signature of Signing Officer or Director

Date