

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004500

FILED
Mar 23, 2009
Secretary of State

Entity Name: PALM BAY ACADEMY, INC.

Current Principal Place of Business:

2112 PALM BAY ROAD NE
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

2112 PALM BAY ROAD NE
PALM BAY, FL 32905

New Mailing Address:

FEI Number: 59-3519824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONGANI, MADHU
502 SANDERLING DRIVE
INDIALANTIC, FL 32903 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: VP () Delete
Name: SONI, RITA
Address: 203 LANSING ISLAND DRIVE
City-St-Zip: INDIANHARBOR BEACH, FL 32937

Title: D () Delete
Name: DEVAULT, CAROL A
Address: 5418 SOLWAY DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: P () Delete
Name: HEINTZMAN, DEBRA DVM
Address: 2990 HIGHWAY A1A
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: S (X) Delete
Name: CHAPMAN, TWILA M
Address: 837 YELLOW WOOD COURT SE
City-St-Zip: PALM BAY, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: HEINTZMAN, DEBRA DVM
Address: 2990 HIGHWAY A1A
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: A (X) Change () Addition
Name: CHAPMAN, TWILA M
Address: 837 YELLOW WOOD COURT SE
City-St-Zip: PALM BAY, FL 32909

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: MADHU LONGANI

RA

03/23/2009

Electronic Signature of Signing Officer or Director

Date