

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 06, 2008 8:00 am
Secretary of State

08-06-2008 90018 019 ***550.00

DOCUMENT # P01000053280 1. Entity Name VIRTUE ACADEMY, INC.			
Principal Place of Business 16 EAST 2ND STREET FROSTPROOF, FL 33843		Mailing Address P.O. BOX 81 FROSTPROOF, FL 33843	
2. Principal Place of Business - No P.O. Box # 16 East 1st Street Suite, Apt. #, etc.		3. Mailing Address PO Box 81 Suite, Apt. #, etc.	
City & State Frostproof, FL Zip Country 33843 US		City & State Frostproof, FL Zip Country 33843 US	
4. FEI Number 59-3743713		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRAVLEY, DEBRA E 11 EAST 2ND STREET FROSTPROOF, FL 33843		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Debra E. Gravley 8/3/08 <small>Signature, typed or printed name of registered agent and print if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRAVLEY, GARY L 11 E. 2ND STREET FROSTPROOF, FL 33843 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Gravley, Gary L. 301 South Lk Reedy Blvd. Frostproof, FL 33843 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRAVLEY, DEBRA E 11 E. 2ND ST FROSTPROOF, FL 33843 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gravley, Debra E. 301 South Lk Reedy Blvd. Frostproof, FL 33843 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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: Debra E. Gravley 8/3/08 863-635-2630 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			