2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000151209

Entity Name: GROVELAND FARMS ACADEMY, INC

FILED Feb 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 207 GROVELAND FARMS ROAD GROVELAND, FL 34736 **Current Mailing Address: New Mailing Address:** 11350 TWELVE OAKS WAY 391 PALM DRIVE ISLAMORADA, FL 33036 NORTH PALM BEACH, FL 33408 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHMID, RYAN A 391 PALM DRIVE ISLAMORADA, FL 33036 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SCHMID, RYAN A SCHMID, FREDERICK W Name: Name: 391 PALM DRIVE 391 PALM DRIVE Address: Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: ISLAMORADA, FL 33036

Title: S () Delete Title: () Change () Addition

 Name:
 BURGREEN, JUSTIN M
 Name:

 Address:
 4826 SE CAPSTAN AVE
 Address:

 City-St-Zip:
 STUART, FL 34997
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUSTIN BURGREEN S 02/07/2007