

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000005700

Entity Name: SCHAWN'S ACADEMY, INC.

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5891 S. MILITARY TRAIL  
#19  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

5891 S. MILITARY TRAIL  
#19  
LAKE WORTH, FL 33463

**New Mailing Address:**

FEI Number: 20-8217351

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PLACIDE, MARIE KETTLER  
6773 ASHBURN RD  
LAKE WORTH, FL 33467 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: PSTD  
Name: PLACIDE, MARIE KETTLER  
Address: 6773 ASHBURN RD  
City-St-Zip: LAKE WORTH, FL 33467

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIE KETTLER PLACIDE

PRES

02/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date