

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000065180

FILED
Apr 18, 2008
Secretary of State

Entity Name: ECADEMIA INCORPORATED

Current Principal Place of Business:

12451 SNOWMAN COURT
NEW PORT RICHEY, FL 34654 18

New Principal Place of Business:

Current Mailing Address:

12451 SNOWMAN COURT
NEW PORT RICHEY, FL 34654 18

New Mailing Address:

FEI Number: 26-0280324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLADAPOULOS, CHRIS
12451 SNOWMAN COURT
NEW PORT RICHEY, FL 34654 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KLADOPOULOS, CHRIS
Address: 12451 SNOWMAN COURT
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D () Delete
Name: KLADAPOULOS, TONI
Address: 12541 SNOWMAN COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KLADAPOULOS, TONI ASB
Address: 12541 SNOWMAN COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

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

SIGNATURE: TONI ASB KLADOPOULOS

DR

04/18/2008

Electronic Signature of Signing Officer or Director

Date