

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000040976

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** DIXIE COUNTY LEARNING ACADEMY, INC.

**Current Principal Place of Business:**

1357 NE 82 AVE  
OLD TOWN, FL 32680

**New Principal Place of Business:**

**Current Mailing Address:**

1357 NE 82 AVE  
OLD TOWN, FL 32680

**New Mailing Address:**

**FEI Number:** 20-2702862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LAMENTA-JOHNSON, SYLVIA  
520 NE 542 ST  
OLD TOWN, FL 32680 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: D  
Name: LAMENTA-JOHNSON, SYLVIA  
Address: 520 NE 542 ST  
City-St-Zip: OLD TOWN, FL 32680

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: SYLVIA LAMENTA

PRES

02/09/2012

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

\_\_\_\_\_  
Date