

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000042560

1. Entity Name
AUGUSTINA ACADEMY, INC.



Principal Place of Business

AUGUSTINA ACADEMY
1307 PINE HILL RD.
ORLANDO, FL 32808 US

Mailing Address

1438 MARBLE CREST WAY
WINTER GARDEN, FL 34787 US

FILED
Jul 16, 2008 08:00 AM
Secretary of State



07142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3185352

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIERCE & ASSOCIATES, P.L.
800 NORTH FERNCREEK AVENUE
ORLANDO, FL 32803

**DO NOT WRITE
IN THIS SPACE**

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

NIA

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P
NAME PEASAH-OPONG, AUGUSTINA A MRS
STREET ADDRESS 1438 MARBLE CREST WAY
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE V
NAME PEASAH, MATILDA
STREET ADDRESS 1438 MARBLE CREST WAY
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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07/16/08-80003-001 150.00

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IN THIS SPACE**

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:

Augustina Peasah
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/08 407-721-7486
Date Daytime Phone #