2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000073169

Title:

Name:

Address:

City-St-Zip:

SEC

NICOLE, JONES F

MIAMI, FL 33169

2951 NW 210 TERR

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Entity Name: AUKELA CHRISTIAN MILITARY ACADEMY, INC.

FILED Mar 09, 2009 Secretary of State

Current P	rincipal Place o	of Business:	New Princ	cipal Place of Business:	
	ISON STREET OOD, FL 33020	US			
Current M	ailing Address	:	New Mailir	ing Address:	
	ISON STREET OOD, FL 33020	US			
FEI Number:	65-0526719	FEI Number Applied For ()	FEI Number Not Appli	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:	
5620 SW 1	EZ, AUDREY B 18 ST DOD, FL 33020	OWNER US			
	named entity su e of Florida.	ubmits this statement for the p	urpose of changing it	its registered office or registered agent, or bo	th,
SIGNATUR	RE:				
	Electronic	Signature of Registered Age	nt	Date	_
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS	S AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECT	ORS
Title: Name: Address: City-St-Zip:	DP () E RODRIQUEZ, AU 5620 S.W. 18 TH HOLLYWOOD, F	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV ()[WILLIAMS, ROD 5620 S.W. 18TH HOLLYWOOD, F	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OFFI () [HIPOLITA, LITTL 5119 SW 24 STF HOLLYWOOD, F	REET	Title: Name: Address: City-St-Zip:	OFFI (X) Change () Addition HIPOLITA, RODRIGUEZ E 5119 SW 24 STREET HOLLYWOOD, FL 33023	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: AUDREY B. RODRIGUEZ DP 03/09/2009

() Change () Addition