2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)...

Jan 26, 2005 8:00 am Secretary of State DOCUMENT # P96000083548 1. Entity Name 01-26-2005 90009 030 ***150.00 MEADOW POINTE ACADEMY INC. Principal Place of Business Mailing Address 28119 COUNTY LINE RD 28119 COUNTY LINE RD WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 59-3407112 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LAWTON, KIM Street Address (P.O. Box Number is Not Acceptable) 28119 COUNTY LINE RD WESLEY CHAPEL FL 33543 Zip Code 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 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD ☐ Addition TITLE ☐ Delete THTLE Change NAME **ERIC B LAWTON** NAME 1323 DEERBOURNE DRIVE STREET ADDRESS STREET ADDRESS WESLEY CHAPEL FL 33543 CITY-ST-7IP CITY-ST-7IP VPD **Change** ☐ Addition TITLE □ Delete TETE F SAM OGDEN NAME NAME 9011 Cormorant Ct 1438 CLEARGLADES DR STREET ADDRESS STREET ADDRESS Tampa FL 33647 CITY-ST-ZIP WESLEY CHAPEL FL CITY-SI-ZIP TITLE Delete_ THILE Change Addition TREASA OGDON NAME NAME 9011 cormorant Ct STREET ADDRESS STREET ADDRESS 1438 CLEARGLADES DR Tampa FL 33647 CITY-ST-ZIP WESLEY CHAPEL FL CITY-ST-ZIP ☐ Delete Change Addition | TITLE PLAWTON, KIMBERLY 1323 DEERBOURNE DR STREET ADDRESS STREET ADDRESS WESLEY CHAPEL FL 33543 CHY-SI-7IP CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST- ZIP CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,07(3)(i), Florida Statutes. I further certify that the information

indicated on this report or supplemental report is true and of the corporation or the receiver or true tee empowered to accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director excepts, 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

SIGNATURE:

FILED