

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005281

**Entity Name:** GLADES ACADEMY, INC.**Current Principal Place of Business:**7368 SR 15  
BLDG. E  
PAHOKEE, FL 33476**Current Mailing Address:**7368 SR 15  
BLDG. E  
PAHOKEE, FL 33476**FEI Number:** 65-1032601**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BORELL, ALEXANDER EESQ  
2889 10 AVE N STE 302  
LAKE WORTH, FL 33461 US*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**Officer/Director Detail :**

Title	D
Name	FANJUL, EMILIA
Address	105 JUNGLE ROAD
City-State-Zip:	PALM BEACH FL 33480

Title	D
Name	CARDENAS, RAUL
Address	1200 E. MAIN STREET
City-State-Zip:	PAHOKEE FL 33476

Title	D
Name	AZQUETA, LYANNE
Address	626 N. DIXIE HWY.
City-State-Zip:	WEST PALM BEACH FL 33401

Title	D
Name	BORELL, ALEXANDER
Address	2889 10TH AVE. N. SUITE 302
City-State-Zip:	PALM SPRINGS FL 33461

Title	D
Name	RIVIERA, GUILLERMO
Address	7450 SR 15
City-State-Zip:	PAHOKEE FL 33476

Title	D
Name	BLADES, ANN
Address	402 SEABREEZE AVE.
City-State-Zip:	PALM BEACH, FL 33480

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

**SIGNATURE:** EMILIA FANJUL**CHAIR****01/09/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date