2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2014
Secretary of State
CC7914447221

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Entity Name: SOUTH MCKEEL ACADEMY, INC.

Current Principal Place of Business:

2222 EDGEWOOD DRIVE S.
LAKELAND, FL 33803

Current Mailing Address:

303 E PEACHTREE ST
LAKELAND, FL 33801 US

FEI Number: 20-3703433

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BLACK, ALAN
2222 EDGEWOOD DRIVE S.
LAKELAND, FL 33803 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: ALAN BLACK 01/09/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	BLACK, ALAN
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	ROSS, LARRY
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	THOMPSON, MARK
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	WOOLEY-BROWN, CATHY
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	MCKEEL, SETH
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	CHAIRMAN
Name	CAFFEY, TAYLOR
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	CAMPBELL, STEPHANIE
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	STARGEL, JOHN
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

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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: JULIE RAMIREZ FINANCE DIRECTOR 01/09/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WALKER, PHILLIP
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	SECRETARY
Name	HAZELL , OLIVIA
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	DIRECTOR
Name	PEEPLES, MICHAEL
Address	2222 EDGEWOOD DRIVE S.
City-State-Zip:	LAKELAND FL 33803

Title	TREASURER
Name	RAMIREZ, JULIE
Address	303 E PEACHTREE ST
City-State-Zip:	LAKELAND FL 33801