

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007463

Entity Name: DIVINE ACADEMY, INC.**Current Principal Place of Business:**619 SOUTH COMMERCE AVE
SEBRING, FL 33870**Current Mailing Address:**619 SOUTH COMMERCE AVE
SEBRING, FL 33870 US**FEI Number:** 45-2723084**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAIGE, DANIEL RSR.
619 SOUTH COMMERCE
SEBRING, FL 33870 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	PD
Name	PAIGE, CELIA C
Address	619 SOUTH COMMERCE AVE
City-State-Zip:	SEBRING FL 33870

Title	VPD
Name	PAIGE, DANIEL RSR.
Address	619 SOUTH COMMERCE AVE
City-State-Zip:	SEBRING FL 33870

Title	CFO
Name	MACKEY, NIQUITA L
Address	619 SOUTH COMMERCE AVE
City-State-Zip:	SEBRING FL 33870

Title	SD
Name	BUTTS, DAISY
Address	608 SE 3RD STREET
City-State-Zip:	BELLE GLADE FL 33430

Title	DIRECTOR
Name	PIERCE, HELEN
Address	114 APIO CIRCLE
City-State-Zip:	SOUTH BAY FL 33493

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: CELIA C. PAIGE**PRESIDENT****01/05/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date