2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000007172

Entity Name: PINEY GROVE BOYS ACADEMY, INC.

FILED
Jan 24, 2018
Secretary of State
CC7272804723

Current Principal Place of Business:

4699 W OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33313

Current Mailing Address:

4699 W OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33313

FEI Number: 46-0645965 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOLDEN, BOB 4699 W OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33313 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 P Title S

NameWEST, PATRICIANameBENJAMIN, JOSEFAAddress4510 NW 25TH ST.Address619 LAKEVIEW DR.

City-State-Zip: LAUDERHILL FL 33313 City-State-Zip: CORAL SPRINGS FL 33071

Title T Title V

Name BRIHM, ANTONIO Name WALKER, THOMAS

Address 2710 NW 7TH ST. Address 3493 INVERRARY BLVD, W
City-State-Zip: FT. LAUDERDALE FL 33311 City-State-Zip: LAUDERHILL FL 33319

Title D Title M

Name THOMAS, SANDRA Name CUMMINGS, BEAUREGARD

Address 3860 LOMBARDY ST. Address 1710 NW 27TH AVE.

City-State-Zip: HOLLYWOOD FL 33021 City-State-Zip: FT. LAUDERDALE FL 33311

Title M Title M

Name GRAHAM, JOSIAH Name DIXON, PHILLIP
Address 3601 SW 2ND ST Address 3112 NW 24TH WAY

City-State-Zip: FT. LAUDERDALE FL 33312 City-State-Zip: OAKLAND PARK FL 33309

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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: PATRICIA WEST PRESIDENT 01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title M

Name METTS, JOSEPH JR. Address 917 E. RIVER DR.

City-State-Zip: MARGATE FL 33063