

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000009764

Entity Name: LMA INSTITUTE INC.

Current Principal Place of Business:

2091 FAWN MEADOW CIRCLE
SAINT CLOUD, FL 34772

Current Mailing Address:

3413 PERCHING RD.
SAINT CLOUD, FL 34772 US

FEI Number: 46-1238747

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SPENCER, ANDREA
2091 FAWN MEADOW CIRCLE
SAINT CLOUD, FL 34772 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: ANDREA SPENCER

03/24/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P/D
Name SPENCER, ANDREA
Address 2091 FAWN MEADOW CIRCLE
City-State-Zip: SAINT CLOUD FL 34772

Title VP
Name PERRY, ANNETTA
Address 1248 SOUTHBEACH CIRCLE
City-State-Zip: KISSIMMEE FL 34746

Title S
Name TEAPE HURST, MARY
Address 4106 MAIDU COURT
City-State-Zip: ST. CLOUD FL 34769

Title D
Name SHARP, BERNADETTE
Address 419 JANISE KAY PLACE
City-State-Zip: KISSIMMEE FL 34744

Title OFFICER
Name JOHNSON, JVAUNI
Address 1200 TETON DRIVE
City-State-Zip: KISSIMMEE FL 34744

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: ANDREA SPENCER

REGISTERED AGENT

03/24/2021

Electronic Signature of Signing Officer/Director Detail

Date