

**2022 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:**

4701 OLD CANOE CREEK RD.  
700896  
SAINT CLOUD, FL 34769 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

03/13/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P/D	Title	S
Name	SPENCER, ANDREA	Name	TEAPE HURST, MARY
Address	2091 FAWN MEADOW CIRCLE	Address	4106 MAIDU COURT
City-State-Zip:	SAINT CLOUD FL 34772	City-State-Zip:	ST. CLOUD FL 34769
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

P

03/13/2022

Electronic Signature of Signing Officer/Director Detail

Date