2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2016
Secretary of State
CC7242684085

DOCUMENT# N13000010607

Entity Name: PEPIN ACADEMIES OF PASCO COUNTY, INC.

Current Principal Place of Business:

1801 N HIGHLAND AVENUE
TAMPA, FL

Current Mailing Address:

3916 E HILLSBOROUGH AVE
TAMPA, FL 33610 US

FEI Number: 46-4199842

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 N HIGHLAND AVENUE
TAMPA, FL 33602 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	PRESIDENT
Name	SHEAFFER, DENNIS
Address	P O BOX 3913
City-State-Zip:	TAMPA FL 33601

Title	DIRECTOR
Name	SPOTO, MARY DR.
Address	33701 SR 72
City-State-Zip:	SAINT LEO FL 33574

Title	DIRECTOR
Name	BILBY, DREAMA DR.
Address	4811 RIVERHILLS DR.
City-State-Zip:	TAMPA FL 33617

Title	CFO
Name	BURKE, CHARLES D
Address	3916 E HILLSBOROUGH AVE
City-State-Zip:	TAMPA FL 33610

Title	DIRECTOR
Name	RICHARDSON, LISA DR.
Address	36727 BLANTON RD.
City-State-Zip:	DADE CITY FL 33523

Title	SECRETARY, TREASURER
Name	TURNER, AMY
Address	2324 HENLEY RD.
City-State-Zip:	LUTZ FL 33558

Title	DIRECTOR
Name	PECKETT, CATHY
Address	9804 LITTLE ROAD
City-State-Zip:	NEW PORT RICHEY FL 34654

Title	DIRECTOR
Name	HUDSON, KRISTINA ESQ.
Address	17526 BALMAHA DR
City-State-Zip:	LAND O'LAKES FL 34638

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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: CHARLES D BURKE CFO 04/26/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MCMILLEN, ERIN
Address	10440 OSCEOLA DR
City-State-Zip:	NEW PORT RICHEY FL 34654