

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000000665

**Entity Name:** LIBERTY ACADEMY FOUNDATION, INC.

**Current Principal Place of Business:**

7750 NW 12TH AVENUE  
MIAMI, FL 33150

**Current Mailing Address:**

7750 NW 12TH AVENUE  
MIAMI, FL 33150

**FEI Number: 83-3169015**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

BRAZIER, MAURICE P  
7750 NW 12TH AVENUE  
MIAMI, FL 33150 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  
Name BRAZIER, SARAH D  
Address 4670 HAMDEN FOREST DRIVE, SW  
City-State-Zip: ATLANTA GA 30331

Title COB  
Name BRAZIER, MAURICE P  
Address 4670 HAMDEN FOREST DRIVE, SW  
City-State-Zip: ATLANTA GA 30331

Title VP  
Name DAVIS, DEBORAH  
Address 4670 HAMDEN FOREST DRIVE, SW  
City-State-Zip: ATLANTA GA 30331

Title VP  
Name BRAZIER, MONIQUE SIMONE  
Address 7750 NW 12TH AVE.  
City-State-Zip: MIAMI FL 33150

*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: SARAH DAVIS BRAZIER**

**P**

**03/15/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date