

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000003511

Entity Name: P.E.T.R.A LEARNING CENTER INC.

Current Principal Place of Business:

749 SOUTH MAIN STREET
BELLE GLADE, FL 33430

Current Mailing Address:

1048 BAYBERRY LOOP
CLEWISTON, FL 33440 US

FEI Number: 86-2872176

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THOMAS, JERNAE AMBR
1048 BAYBERRY LOOP
CLEWISTON, FL 33440 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 DIR.
Name SHANNON, GLORIA
Address 749 S. MAIN ST
City-State-Zip: BELLE GLADE FL 33430

Title DIR.
Name PELHAM, KAREN
Address 749 S. MAIN ST
City-State-Zip: BELLE GLADE FL 33430

Title DIR
Name THOMAS-WILKERSON, TABATHA
Address 749 S MAIN ST
City-State-Zip: BELLE GLADE FL 33430

Title DIR.
Name TODD-WASHINGTON, JUCOBIE
Address 749 S MAIN ST
City-State-Zip: BELLE GLADE FL 33430

Title P
Name THOMAS, JERNAE
Address 1048 BAYBERRY LOOP
City-State-Zip: CLEWISTON FL 33440

Title VP
Name THOMAS, MICAH
Address 1048 BAYBERRY LOOP
City-State-Zip: CLEWISTON FL 33440

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: JERNAE THOMAS

P

01/13/2022

Electronic Signature of Signing Officer/Director Detail

Date