2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2025
Secretary of State
4510705832CC

DOCUMENT# N98000003597

Entity Name: THE SCHOOLS OF MCKEEL ACADEMY INC.

Current Principal Place of Business:

303 E PEACHTREE STREET
LAKELAND, FL 33801

Current Mailing Address:

3616 HARDEN BLVD
SUITE 389
LAKELAND, FL 33803 US

FEI Number: 65-0854467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLACK, ALAN
303 E PEACHTREE STREET
LAKELAND, FL 33801 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: ALAN BLACK 02/10/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	MCKEEL, SETH
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	TREASURER
Name	SENTNER, ALICIA
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	DIRECTOR
Name	CLANTON, MICHAEL
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	DIRECTOR
Name	WALKER, PHILLIP
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	PRESIDENT
Name	BLACK, ALAN
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	DIRECTOR
Name	CAMPBELL, STEPHANIE
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	DIRECTOR
Name	PEEPLES, MICHAEL
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	CHAIRMAN
Name	SYNDER, ANDREW
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

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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: ALICIA SENTNER FINANCE DIRECTOR 02/10/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	CS
Name	EISENHARDT, JEAN
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	DIRECTOR
Name	BUTTS, SHEENA
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	DIRECTOR
Name	MCCAULLEY, FRANK
Address	303 E PEACHTREE STREET
City-State-Zip:	LAKELAND FL 33801

Title	FINANCE
Name	KATY, WIBERT
Address	3616 HARDEN BLVD SUITE 389
City-State-Zip:	LAKELAND FL 33803