

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000055284

**FILED  
Apr 12, 2016  
Secretary of State  
CC2984109190**

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

**Current Principal Place of Business:**

3675 SAN PABLO BLVD.  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

PO BOX 330108  
ATLANTIC BEACH, FL 32233

**FEI Number: 59-2969186**

**Certificate of Status Desired: No**

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

SORRELL, MARY CESQ  
2440 MAYPORT RD.#7  
ATLANTIC BEACH, FL 32233 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            DVP  
Name            HIONIDES, NADIA  
Address        3675 SAN PABLO RD.SOUTH  
City-State-Zip: JACKSONVILLE FL 32250

Title            DP  
Name            HIONIDES, NADIA  
Address        3675 SAN PABLO ROAD SOUTH  
City-State-Zip: JACKSONVILLE FL 32250

Title            DVP  
Name            TRENDEL, MARO  
Address        3675 SAN PABLO ROAD SOUTH  
City-State-Zip: JACKSONVILLE FL 32250

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: NADIA HIONIDES**

**PRESIDENT**

**04/12/2016**

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

\_\_\_\_\_  
Date