FEI Number: 59-1218101			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
TOWNSEND, BRIAN 2812 W US 90 MADISON, FL 32340 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	BRIAN TOWNSEND			04/04/2017
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	D	Title	Р	
Name	WILLIAMS, CINDY	Name	TOWNSEND, BRIAN	
Address	454 NE WHISPERING PINES LOOP	Address	4961 NW CR 252	
City-State-Zip:	MADISON FL 32340	City-State-Zip:	GREENVILLE FL 32331	
Title	TREASURER	Title	CORRESPONDING SECRETAR	Y
Name	BUNCH, MARGARET ANN	Name	BLAIR, MARILYN	
Address	P.O. BOX 612	Address	150 NE CHEROKEE ROSE WAY	
City-State-Zip:	MADISON FL 32341	City-State-Zip:	MADISON FL 32340	

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: BRIAN TOWNSEND

Electronic Signature of Signing Officer/Director Detail

04/04/2017

FILED Apr 04, 2017 Secretary of State CC9218074749

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## DOCUMENT# 714480

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: MADISON ACADEMY, INC.

### **Current Principal Place of Business:**

2812 W US 90 MADISON, FL 32340

### **Current Mailing Address:**

PO BOX 690 MADISON, FL 32341

# PRESIDENT

Date