

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707696

FILED
Feb 16, 2010
Secretary of State

Entity Name: PALMER TRINITY PRIVATE SCHOOL, INC.

Current Principal Place of Business:

7900 SOUTHWEST 176TH STREET
PALMETTO BAY, FL 331576242

New Principal Place of Business:

Current Mailing Address:

7900 SOUTHWEST 176TH STREET
PALMETTO BAY, FL 331576242

New Mailing Address:

FEI Number: 23-7098500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUDOVICI, SUSAN
LUDOVICI & LUDOVICI
17415 SOUTH DIXIE HIGHWAY
PALMETTO BAY, FL 33157 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C
Name: MORRISON, WILLIAM
Address: 315 SOLANO PRADO
City-St-Zip: CORAL GABLES, FL 33156

Title: VC
Name: LUDOVICI, SUSAN
Address: 17415 SOUTH DIXIE HIGHWAY
City-St-Zip: PALMETTO BAY, FL 33157

Title: S
Name: FORMAN, DANIEL
Address: 1401 BRICKELL AVE, SUITE 910
City-St-Zip: MIAMI, FL 33133

Title: P
Name: MURPHY, JOHN
Address: 7900 SW 176 STREET
City-St-Zip: PALMETTO BAY, FL 33157

Title: T
Name: DAVIDSON, JAMES
Address: 1395 BRICKELL AVE, SUITE 900
City-St-Zip: MIAMI, FL 33131

Title: VC
Name: BROCKWAY, PAULA
Address: 4835 HAMMOCK LAKE DRIVE
City-St-Zip: CORAL GABLES, FL 33156

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: JOSE CHAO, CPA

CFO

02/16/2010

Electronic Signature of Signing Officer or Director

_____ Date