2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 21, 2001 8:00 am Secretary of State **DOCUMENT # 707936** 1. Entity Name THE CANTERBURY SCHOOL, INC. 03-21-2001 90027 004 ****61.25 Principal Place of Business Mailing Address 8141 COLLEGE PARKWAY 8141 COLLEGE PARKWAY FT MYERS FL 33919-5109 FT MYERS FL 33919-5109 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1058089 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required - 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SIEGEL. BARBARA B 27 FALCONWOOD COURT FT. MYERS FL 33919 Zip Code FI 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **FILE NOW:** Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. STD TR TITLE ☐ Delete TITLE Change Change ☐ Addition MORRONI, ANNETTE NAME NAME STREET ADDRESS 13540 BRYNWOOD LANE, SE STREET ADDRESS CITY-ST-ZIP FT MYERS FL 33912 CITY-ST-ZIP CTTR TITLE ☐ Delete TITLE ☐ Change ☐ Addition LUCAS, DAVID NAME NAME STREET ADDRESS 13141 PONDEROSA WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33907 PETR TITLE TITLE PPETR ☐ Addition Delete Change SIEGEL, BARBARA B NAME NAME STREET ADDRESS 27 FALCONWOOD CT STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P FT. MYERS FL 33919 VTR TITLE ☐ Delete TITLE **X** Change ■ Addition NAME CARRON, MICHAEL NAME STREET ADDRESS 13281 PONDEROSA WAY STREET ADDRESS CiTY-ST-7IP FT MYERS FL 33907 CITY-ST-ZIP TR TITLE ☐ Delete TITLE ☐ Addition ELLENBERG, KENNETH E NAME NAME STREET ADDRESS 1238 ISABEL DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-7IP SANIBEL ISLAND FL 33957 TR TITLE ☐ Delete TITLE ☐ Change ☐ Addition BORDEN, PATRICIA S NAME NAME STREET ADDRESS 3880 W. RIVERSIDE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33901 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered. EPULBARBARA B SIEGEL 1/14/0/ (941) 481-4323

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