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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715097 (2)
1. Corporation Name
THE CANTERBURY SCHOOL OF FLORIDA, INC.

Principal Place of Business Mailing Address
901 58TH AVENUE NE 901 58TH AVENUE NE
ST PETERSBURG FL 33703 ST PETERSBURG FL 33703

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/12/1968 3a. Date of Last Report 05/01/1994
4. FEI Number 59-1218022 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

STANTON, JOHN D., III
901 58TH AVENUE N.E.
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when resigning.

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS
TITLE D
NAME STANTON, JOHN D.
STREET ADDRESS 901 58TH AVENUE N.E.
CITY-ST-ZIP ST. PETERSBURG FL
TITLE PD
NAME ORTIZ, LOUIS
STREET ADDRESS 6 ISLAND DRIVE
CITY-ST-ZIP TREASURE ISLAND FL
TITLE T
NAME EARLE, SUZANNE C
STREET ADDRESS 725 36TH AVE NORTH
CITY-ST-ZIP ST. PETERSBURG FL
TITLE TD
NAME FEINBERG, HELEN
STREET ADDRESS 6071 LEELAND ST. SOUTH
CITY-ST-ZIP ST. PETERSBURG FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE V.P./T ☒ Change ☐ Addition
2.2 NAME Suzanne C. Earle
2.3 STREET ADDRESS 725 36th Avenue North
2.4 CITY-ST-ZIP St. Petersburg, FL 33704
3.1 TITLE T ☒ Change ☐ Addition
3.2 NAME Larry M. Geiger
3.3 STREET ADDRESS 1443 54th Avenue N.E.
3.4 CITY-ST-ZIP St. Petersburg, FL 33703
4.1 TITLE S/T ☒ Change ☐ Addition
4.2 NAME William R. Lane Jr.
4.3 STREET ADDRESS 1408 72nd Ave. N.E.
4.4 CITY-ST-ZIP St. Petersburg, FL 33702
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Suzanne C. Earle
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

2-2-95

526-1541