2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715097

FILED Jan 18, 2006 Secretary of State

Entity Name: THE CANTERBURY SCHOOL OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

901 58TH AVENUE NE ST PETERSBURG, FL 33703

Current Mailing Address: New Mailing Address:

901 58TH AVENUE NE ST PETERSBURG, FL 33703

FEI Number: 59-1218022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WELSH, ELLEN HALL, MAC H

901 58TH AVENUE N.E. 901 58TH AVENUE N.E.

ST. PETERSBURG, FL 33703 US ST. PETERSBURG, FL 33703 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: MAC H. HALL 01/18/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 MC QUEEN, WILLIAM B
 Name:

 Address:
 2201 9TH STREET NORTH
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33704
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition Name: SIVER, ROBERT I Name: UPDEGRAFF, ELIZABETH Address: 114 GIRALDA BLVD.. NE Address: 1833 BRIGHTWATERS BLVD NE City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: SAINT PETERSBURG, FL 33704

Title: TD () Delete Title: () Change () Addition

 Name:
 HANNA, SUSAN C
 Name:

 Address:
 902 MARCO DRIVE NE
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33702
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM B MC QUEEN PD 01/18/2006