2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002199

FILED Jun 18, 2009 Secretary of State

Entity Name: MONTESSORI ACADEMY OF EARLY ENRICHMENT, INC.

Current Principal Place of Business: New Principal Place of Business: 6201 S. MILITARY TRAIL LAKE WORTH, FL 33463 US **Current Mailing Address: New Mailing Address:** 6201 S. MILITARY TRAIL LAKE WORTH, FL 33463 US FEI Number: 73-1729769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RANCK, MYRA J 317 SWAIN BLVD. GREENACRES, FL 33463 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ZECCA, ALAN Name: Name: Address: 6732 BROOKHURST CIRCLE Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: FORMAN, AMY Name: MURPHY, ELLA E Address: 2015 RESTON CIRCLE Address: 1416 CRESTWOOD BLVD City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: LAKE WORTH, FL 33460 Title: () Delete Title: (X) Change () Addition MANGIAPANI, ANN LOURDES, DIAZ Name: Name: 240 SUDBURY LANE Address: Address: 405 SWAIN BLVD City-St-Zip: ATLANTIS, FL 33462 City-St-Zip: GREENACRES, FL 33463 () Delete Title: Title: (X) Change () Addition Name: LUKE, WENDY Name: LOZOYA, BERNARDA C 5925-5 CEYLON COURT 325 JACKSON AVE. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: GREENACRES, FL 33463 Title: () Delete Title: (X) Change () Addition DIAZ, LOURDES FORMAN, AMY Name: Name: 406 SWAIN BLVD 2015 RESTON CIR Address: Address: GREENACRES, FL 33463 City-St-Zip: City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify 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: AL ZECCA D 06/18/2009