

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002199

FILED
Mar 17, 2011
Secretary of State

Entity Name: MONTESSORI ACADEMY OF EARLY ENRICHMENT, INC.

Current Principal Place of Business:

6300 LAKE WORTH ROAD
GREENACRES, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

6300 LAKE WORTH ROAD
GREENACRES, FL 33463 US

New Mailing Address:

FEI Number: 73-1729769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RANCK, MYRA J
317 SWAIN BLVD.
GREENACRES, FL 33463 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: D
Name: MURPHY, ELLA
Address: 1416 CRESTWOOD BLVD
City-St-Zip: LAKE WORTH, FL 33460

Title: O
Name: FORMAN, AMY
Address: 2015 RESTON CIR.
City-St-Zip: ROYAL PALM BEACH, FL 33460

Title: O
Name: LOURDES, DIAZ
Address: 405 SWAIN BLVD
City-St-Zip: GREENACRES, FL 33463

Title: O
Name: LOZOYA, BERNARDA C
Address: 365 WALKER AVENUE
City-St-Zip: GREENACRES, FL 33463

Title: O
Name: ALEXANDRA, CELENE DR.
Address: 5000 N. OCEAN BLVD
City-St-Zip: BRINY BREEZES, FL 33435

Title: O
Name: GONZALEZ, LUIS
Address: 13765 BOTTLEBRUSH CT.
City-St-Zip: WELLINGTON, FL 33414

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: ELLA MURPHY

D

03/17/2011

Electronic Signature of Signing Officer or Director

Date