2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000111

FILED Feb 14, 2008 Secretary of State

Entity Name: THE PAIDEIA SCHOOL OF TAMPA BAY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
7834 NOR TAMPA, F	RTH 56TH STR L 33617	EET		
Current Mailing Address:		New Mailing Address:		
7834 NOR TAMPA, F	RTH 56TH STR L 33617	EET		
FEI Number	: 20-4057167	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
TAMPA, F The above	RTH 56TH STR L 33617 US e named entity:	5	purpose of changing its register	red office or registered agent, or both,
	e of Florida.			
SIGNATU		nic Signature of Registered Ac	ent	Date
		nic Signature of Registered Ag		Date GES TO OFFICERS AND DIRECTO
	Electron S AND DIREC D (ALLEN, MATTH 7725 BINGHAM	TORS:) Delete EW 1 CT		Date GES TO OFFICERS AND DIRECTO () Change () Addition
OFFICER. Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron S AND DIREC D (1 ALLEN, MATTH 7725 BINGHAN TAMPA, FL 33	TORS:) Delete IEW 1 CT 625) Delete	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTO
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OFFICER Title: Name: Address:	Electron S AND DIREC D (ALLEN, MATTH- 7725 BINGHAN, TAMPA, FL 33 D (RAABE, THOR 5003 ARUNDE, TAMPA, FL 33 D (BRAY, ROBER 15115 CONTO) TAMPA, FL 33	TORS:) Delete IEW 1 CT 625) Delete LL CT 624) Delete T Y PLACE 618) Delete HUR NT RIDGE PL	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition

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: CONRAD J. BRAY D 02/14/2008