## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000000464

FILED Apr 29, 2009 Secretary of State

Entity Name: VILLAGE MONTESSORI DAY SCHOOL, INC.

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

211 PHOENETIA AVE. #23 1414 SW 22 ST MIAMI, FL 33134 MIAMI, FL 33145

Current Mailing Address: New Mailing Address:

211 PHOENETIA AVE. #23 1414 SW 22 ST MIAMI, FL 33134 MIAMI, FL 33145

FEI Number: 56-2640103 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:

RODRIGUEZ, JOAN
211 PHOENETIA AVE. #23
MIAMI, FL 33134 US

RODRIGUEZ, JOAN
1414 SW 22 ST
MIAMI, FL 33145 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: JOAN RODRIGUEZ 04/29/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDI

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition Name: RODRIGUEZ, JOAN Name: RODRIGUEZ, JOAN

Address: 211 PHOENETIA AVE. #23 Address: 1414 SW 22 ST
City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIAMI, FL 33145

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition Name: MALONE, JAMES M Name: MALONE, JAMES M

Address: 211 PHOENETIA AVE. #23 Address: 1414 SW 22 ST City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ROMAN, MELISSA
 Name:

 Address:
 51 EDGEWATER DR. #2
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33133
 City-St-Zip:

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: JOAN RODRIGUEZ PRES 04/29/2009