

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008603

FILED
Apr 21, 2009
Secretary of State

Entity Name: HERITAGE PRIVATE SCHOOL SYSTEMS, INC.

Current Principal Place of Business:

6700 BOUGAINVILLIA AVE SOUTH
SAINT PETERSBURG, FK 33707

New Principal Place of Business:

Current Mailing Address:

PO BOX 565
PINELLAS PARK, FL 33780

New Mailing Address:

FEI Number: 59-3300488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORLAND, JOHN R ESQ
1927 SUMMIT DR
CLEARWATER, FL 33763 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: P () Delete
Name: BORLAND, JOHN R
Address: 1927 SUMMIT DR
City-St-Zip: CLEARWATER, FL 33763

Title: V () Delete
Name: BUELLER, KEN
Address: 5580 14 AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: S () Delete
Name: DEMESQUITA, CANDY
Address: 6700 BOUGAINVILLIA AVE SOUTH
City-St-Zip: SAINT PETERSBURG, FK 33707

Title: T () Delete
Name: WARREN, CHERYL
Address: 11141 105TH AVE NORTH
City-St-Zip: LARGO PETERSBURG, FL 33778

Title: D () Delete
Name: BUELLER, VICKY
Address: 5580 14 AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CHERYL WARREN

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date