

**2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 07, 2006  
Secretary of State**

DOCUMENT# N98000000262

Entity Name: CORAL REEF MONTESSORI ACADEMY CHARTER SCHOOL, INC.

**Current Principal Place of Business:**

10875 S.W. 186 STREET  
MIAMI, FL 33157 US

**New Principal Place of Business:**

10853 S.W. 216 STREET  
MIAMI, FL 33170 US

**Current Mailing Address:**

14651 SW 99 CT  
MIAMI, FL 33176

**New Mailing Address:**

FEI Number: 65-0840179      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:**

KING, JULIET  
14561 SW 99 CT  
MIAMI, FL 33176 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: JULIET KING

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HAMLER, ELSIE  
Address: 14651 SW 99 CT  
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete  
Name: GOLDEN, VICTOR  
Address: 14802 S.W. 139 PLACE  
City-St-Zip: MIAMI, FL 33189

Title: PD ( ) Delete  
Name: GOLDEN, LUCY C  
Address: 14802 SW 139 PL  
City-St-Zip: MIAMI, FL 33189

Title: SD ( ) Delete  
Name: KING, JULIET  
Address: 14651 SW 99 CT  
City-St-Zip: MIAMI, FL 33176

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIET KING

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

SD

10/07/2006

\_\_\_\_\_  
Date