

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 31, 2009
Secretary of State**

DOCUMENT# N98000000262

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

Current Principal Place of Business:

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

New Principal Place of Business:

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 ()

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

Title: D () Delete
Name: FAUNTROY, RAY
Address: 14540 JACKSON STREET
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: TORRES, NESTOR
Address: 10853 SW 216 STREET
City-St-Zip: MIAMI, FL 33170

Title: D () Delete
Name: CARR, WENDALL
Address: 17900 SW 160 AVE
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: TOWNSEND, GERALDINE
Address: 24201 SW 120 AVENUE
City-St-Zip: MIAMI, FL 33032

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
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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: JULIET KING

RA

03/31/2009

Electronic Signature of Signing Officer or Director

Date