

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS**FILED**
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90203 042 ****61.25

DOCUMENT # N96000003964

1. Corporation Name

THE CENTER SCHOOL, INCORPORATED

Principal Place of Business

9877 GULFSTREAM BLVD.
ENGLEWOOD FL 34224

Mailing Address

9877 GULFSTREAM BLVD
ENGLEWOOD FL 34224
US

2. Principal Place of Business

21 7275 Manasota Key Rd.

2a. Mailing Address

26 7275 Manasota Key Rd.

3. Date Incorporated or Qualified

07/26/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

31-1475342

Applied For

Not Applicable

City & State

23 Englewood, Florida

City & State

28 Englewood, Florida

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

Zip

24 34223

Country

25 Sarasota

Zip

29 34223

Country

30 Sarasota

6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees

9. Name and Address of Current Registered Agent

FURY, SANDRA J
9877 GULFSTREAM BLVD.
ENGLEWOOD FL 34224

10. Name and Address of New Registered Agent

81 Name
Lynn R. Bernstein, Ph.D.82 Street Address (P.O. Box Number is Not Acceptable)
7275 Manasota Key Rd.

83

84 City
Englewood,

FL

85 Zip Code
34223

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Lynn R. Bernstein, Ph.D. 04/27/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETETT
NAME FURY, SANDRA J
STREET ADDRESS 9877 GULFSTREAM BLVD
CITY-ST-ZIP ENGLEWOOD FL 34224TITLE ☐ DELETESTT
NAME FURY, SANDRA J.
STREET ADDRESS 9877 GULFSTREAM BLVD
CITY-ST-ZIP ENGLEWOOD FLTITLE ☐ DELETET
NAME BERNSTEIN, LYNN PHD
STREET ADDRESS 1861 PLACIDA RD
CITY-ST-ZIP ENGLEWOOD FLTITLE ☐ DELETET
NAME MORLAND, LINDA A
STREET ADDRESS 165 W. GREEN ST.
CITY-ST-ZIP ENGLEWOOD FLTITLE ☐ DELETEST
NAME PARSONS, RUTH
STREET ADDRESS 895 MORRISON AVE
CITY-ST-ZIP ENGLEWOOD FL 34223TITLE ☐ DELETET
NAME FURY, PATRICK T
STREET ADDRESS 9877 GULFSTREAM BLVD
CITY-ST-ZIP ENGLEWOOD FL 34224

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ AdditionC/T
1.2 NAME Lynn R. Bernstein, Ph.D.

1.3 STREET ADDRESS 7275 Manasota Key Rd.

1.4 CITY-ST-ZIP Englewood, FL 34223

2.1 TITLE ☐ Change ☒ AdditionVC/T
2.2 NAME Sally Lucke

2.3 STREET ADDRESS 5033 Oxford Dr.

2.4 CITY-ST-ZIP Sarasota, FL 34243

3.1 TITLE ☐ Change ☒ AdditionS/T
3.2 NAME Viveka von Rosen

3.3 STREET ADDRESS PO Box 973

3.4 CITY-ST-ZIP Placida, FL 33946

4.1 TITLE ☐ Change ☒ AdditionT/T
4.2 NAME Joseph Bernstein

4.3 STREET ADDRESS 7275 Manasota Key Rd.

4.4 CITY-ST-ZIP Englewood, FL 34223

5.1 TITLE ☒ Change ☐ AdditionT
5.2 NAME Sandra J. Fury

5.3 STREET ADDRESS 9877 Gulfstream Blvd

5.4 CITY-ST-ZIP Englewood, FL 34223

6.1 TITLE ☐ Change ☐ AdditionT
6.2 NAME Linda Morland, Attorney

6.3 STREET ADDRESS 165 W. Green St

6.4 CITY-ST-ZIP Englewood, FL 34223

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Lynn R. Bernstein, Ph.D. 941-474-7170 04/27/99

Date

Daytime Phone #

CR2E037 (1/198)