# 2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 714203** 

Entity Name: CHILDREN'S EDUCATIONAL SERVICES, INC.

FILED
Aug 29, 2025
Secretary of State
7073877823CC

### **Current Principal Place of Business:**

90 FORT WADE RD

SUITE 115

PONTE VEDRA, FL 32081

### **Current Mailing Address:**

90 FORT WADE RD SUITE 115

PONTE VEDRA, FL 32081 US

FEI Number: 59-1216794 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WEAD, RICH JOSEPH 90 FORT WADE RD SUITE 115

PONTE VEDRA, FL 32081 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: RICH WEAD 08/29/2025

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

City-State-Zip:

Title DIRECTOR, PRESIDENT Title DIRECTOR, VP

Name WEAD, RICH JOSEPH Name UPRICHARD, ANDY STEPHEN

Address 90 FORT WADE RD Address 90 FORT WADE RD

SUITE 115 SUITE 115

PONTE VEDRA FL 32081 City-State-Zip: PONTE VEDRA FL 32081

 Title
 DIRECTOR, VP
 Title
 DIRECTOR

 Name
 BLANCO, ALVARO
 Name
 ZINK, PAUL D

Address 90 FORT WADE RD Address 90 FORT WADE RD

SUITE 115 SUITE 115

City-State-Zip: PONTE VEDRA FL 32081 City-State-Zip: PONTE VEDRA FL 32081

TitleDIRECTORTitleDIRECTORNameWILSON, SEANNameMOSS, DAVID

Address 90 FORT WADE RD Address 90 FORT WADE RD

SUITE 115 SUITE 115

City-State-Zip: PONTE VEDRA FL 32081 City-State-Zip: PONTE VEDRA FL 32081

I hereby 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 all other like empowered.