

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729570

**Entity Name:** CHILDREN'S EDUCATION CENTER OF THE ISLAND'S, INC.**Current Principal Place of Business:**350 CASA YBEL ROAD  
SANIBEL, FL 33957**Current Mailing Address:**350 CASA YBEL ROAD  
SANIBEL, FL 33957 US**FEI Number:** 59-1533336**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PIKE, KERRA  
350 CASA YBEL ROAD  
SANIBEL, FL 33957 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:** CINDY C DECOSTA

02/03/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name           STEWART, JOSHUA  
Address        350 CASA YBEL ROAD  
City-State-Zip: SANIBEL FL 33957

Title            OTHER, SECRETARY  
Name           SCHAFER, KATE  
Address        350 CASA YBEL ROAD  
City-State-Zip: SANIBEL FL 33957

Title            PRESIDENT  
Name           STEWART, NITA  
Address        350 CASA YBEL RD.  
City-State-Zip: SANIBEL FL 33957

Title            VP  
Name           BRAUN, JENNIFER  
Address        350 CAST YBEL RD.  
City-State-Zip: SANIBEL FL 33957

Title            DIRECTOR  
Name           PIKE, KERRA  
Address        350 CASA YBEL RD  
City-State-Zip: SANIBEL FL 33957

*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.*

**SIGNATURE:** KERRA DAWN PIKE**DIRECTOR**

02/03/2021

Electronic Signature of Signing Officer/Director Detail

Date