

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003581

**Entity Name:** CITY INNOVATION SCHOOL INC

**Current Principal Place of Business:**

16400 NW 15 AVE  
MIAMI, FL 33169

**Current Mailing Address:**

16400 NW 15 AVE  
MIAMI, FL 33169 US

**FEI Number:** 65-1069412

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MAGWOOD, SHERRY  
16400 NW 15 AVE  
MIAMI, FL 33169 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:** SHERRY MAGWOOD

04/30/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           ASTWOOD, GEORGE  
Address        16400 NW 15 AVE  
City-State-Zip: MIAMI FL 33169

Title           DIRECTOR  
Name           BRANKER, MESHELL  
Address        16400 NW 15 AVE  
City-State-Zip: MIAMI FL 33169

Title           SECRETARY, VP  
Name           MAGWOOD, SHERRY  
Address        16400 NW 15 AVE  
City-State-Zip: MIAMI FL 33169

Title           PRESIDENT  
Name           WRIGHT, URSULA  
Address        16400 NW 15 AVE  
City-State-Zip: MIAMI FL 33169

*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:** SHERRY MAGWOOD

VP/SECRETARY

04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date