

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006236

Entity Name: MONTESSORI MULTICULTURAL SCHOOL, INC.**Current Principal Place of Business:**13411 SHIRE LANE
FORT MYERS, FL 33912**Current Mailing Address:**13411 SHIRE LANE
FORT MYERS, FL 33912**FEI Number:** 20-4971719**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUENTHER, JILL
13411 SHIRE LANE
FORT MYERS, FL 33912 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|---------------------|
| Title | ED |
| Name | GUENTHER, JILL |
| Address | 4528 PALM TREE BLVD |
| City-State-Zip: | CAPE CORAL FL 33904 |

| | |
|-----------------|---------------------|
| Title | PRES |
| Name | LAWLOR, PATRICIA |
| Address | 13411 SHIRE LANE |
| City-State-Zip: | FORT MYERS FL 33912 |

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|-----------------|---------------------|
| Title | VP |
| Name | REYNOLDS, JOSH |
| Address | 13411 SHIRE LANE |
| City-State-Zip: | FORT MYERS FL 33912 |

| | |
|-----------------|---------------------|
| Title | TREA |
| Name | STRICKLAND, DORA |
| Address | 2431 SUNRISE BLVD |
| City-State-Zip: | FORT MYERS FL 33907 |

| | |
|-----------------|---------------------|
| Title | SEC |
| Name | LEE, RHONDA |
| Address | 13411 SHIRE LANE |
| City-State-Zip: | FORT MYERS FL 33912 |

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: JILL GUENTHER**DIRECTOR****04/16/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date