

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N09000008982

Entity Name: PIVOT EDUCATION, INC.

Current Principal Place of Business:

2675 WINKLER AVE
SUITE 200
FORT MYERS, FL 33901

Current Mailing Address:

2675 WINKLER AVE
SUITE 200
FORT MYERS, FL 33901 US

FEI Number: 27-1680083

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CFRA, LLC
100 SOUTH ASHLEY DRIVE SUITE 400
TAMPA, FL 33602 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 DIRECTOR
Name YARBOROUGH, DAVID
Address 18602 LE DAUPHINE PLACE
City-State-Zip: LUTZ FL 33558

Title DIRECTOR
Name DIXON, DON DR.
Address 10519 FIRE OAK CT
City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR
Name KNOTT, BILL
Address 1900 SW 35TH AVE
City-State-Zip: FT. LAUDERDALE FL 33312

Title DIRECTOR
Name STACY, VIRGINIA
Address 12699 STONE VALLEY LOOP
City-State-Zip: FT. MYERS FL 33913

Title DIRECTOR
Name GUELZOW, JIM
Address 5513 RAVEN CT
City-State-Zip: TAMPA FL 33625

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: DAVID YARBOROUGH

BOARD CHAIR

05/11/2016

Electronic Signature of Signing Officer/Director Detail

Date