

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000004771

**Entity Name:** THE BRICK AND MORTAR COMMUNITY SERVICE ORGANIZATION SCHOOL INC.

**FILED  
Apr 30, 2016  
Secretary of State  
CC1488174391**

**Current Principal Place of Business:**

3501 WEST VINE STREET  
SUITE 524  
KISSIMMEE, FL 34741

**Current Mailing Address:**

PO BOX 420733  
KISSIMMEE, FL 34741 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

SMITH, KREGG  
3501 WEST VINE STREET  
SUITE 524  
KISSIMMEE, FL 34741 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 D  
Name LATCHMANSINGH, GLEN  
Address 1507 SLASH PINE COURT  
City-State-Zip: ORANGE PARK FL 32073

Title D  
Name LATCHMANSINGH, IAN  
Address PO BOX 701758  
City-State-Zip: ST. CLOUD FL 34770

Title D  
Name SMITH, KREGG  
Address PO BOX 420733  
City-State-Zip: KISSIMMEE FL 34741

Title PT  
Name LATCHMANSINGH, ANJULI  
Address P.O. BOX 420733  
City-State-Zip: KISSIMMEE FL 34741

*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: KREGG SMITH**

**DIRECTOR**

**04/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date