

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000897

**Entity Name:** GULLIVER SCHOOLS, INC.**Current Principal Place of Business:**1500 SAN REMO AVENUE, PH-400  
CORAL GABLES, FL 33146**Current Mailing Address:**1500 SAN REMO AVENUE, PH-400  
CORAL GABLES, FL 33146**FEI Number:** 65-0900712**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRUTULIS, JOHN  
1500 SAN REMO AVENUE, PH-400  
CORAL GABLES, FL 33146 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	BARTEL, JEFFREY S
Address	1500 SAN REMO AVENUE, PH-400
City-State-Zip:	CORAL GABLES FL 33146

Title	D
Name	WITHERSPOON, LIBBY
Address	1500 SAN REMO AVENUE, PH-400
City-State-Zip:	CORAL GABLES FL 33146

Title	DP
Name	NUNEZ, EMILIO
Address	1500 SAN REMO AVE, PH-400
City-State-Zip:	CORAL GABLES FL 33146

Title	D
Name	KERDYK, BILL
Address	1500 SAN REMO AVENUE, PH-400
City-State-Zip:	CORAL GABLES FL 33146

Title	DT
Name	GOULD, BARRY S
Address	1500 SAN REMO AVENUE, PH-400
City-State-Zip:	CORAL GABLES FL 33146

Title	DS
Name	WATTS-FITZGERALD, ABIGAIL
Address	1500 SAN REMO AVENUE, PH-400
City-State-Zip:	CORAL GABLES FL 33146

*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:** EMILIO NUNEZ

DP

01/17/2013

Electronic Signature of Signing Officer/Director Detail

Date