

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 329232

FILED
Mar 19, 2009
Secretary of State

Entity Name: PARK MAITLAND SCHOOL INC

Current Principal Place of Business:

1450 S. ORLANDO AVENUE
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 941095
MAITLAND, FL 327941095

New Mailing Address:

FEI Number: 59-1203044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEPPIN, ELISABETH C
1701 E. WASHINGTON ST.
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COHEN, WILLIAM H
Address: 865 MOJAVE TRAIL
City-St-Zip: MAITLAND, FL 32751

Title: VTS () Delete
Name: KLEPPIN, ELISABETH C
Address: 1701 E WASHINGTON ST
City-St-Zip: ORLANDO, FL 32803

Title: V () Delete
Name: BOWEN, MARY M
Address: 5327 LANYARD COURT
City-St-Zip: WINTER PARK, FL 32792

Title: V () Delete
Name: FRITCH, CAROLYN C
Address: 14365 SE HWY 42
City-St-Zip: WEIRSDALE, FL 32195

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISABETH C. KLEPPIN

VTS

03/19/2009

Electronic Signature of Signing Officer or Director

_____ Date