## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 573255**

Entity Name: THE KEISER SCHOOL, INC.

6069 NW 87TH AVE

PARKLAND, FL 33067

Address: City-St-Zip: FILED May 02, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1500 NW 49TH ST 1900 W COMMERCIAL BLVD FT LAUDERDALE, FL 33309 US STE 175 FT LAUDERDALE, FL 33309 US **Current Mailing Address: New Mailing Address:** 1900 W COMMERCIAL BLVD 1500 NW 49TH ST ATTN: ACCOUNTING STE 175, ATTN: ACCOUNTING FT LAUDERDALE, FL 33309 US FT LAUDERDALE, FL 33309 FEI Number: 59-1829662 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KEISER, ARTHUR 6069 NW 87TH AVE PARKLAND, FL 33067 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PSTD** ( ) Delete () Change () Addition KEISER, ARTHUR DR Name: Name: 6069 NW 87TH AVE Address: Address: City-St-Zip: PARKLAND, FL 33067 City-St-Zip: Title: Title: () Delete () Change () Addition Name: KEISER, EVELYN C Name: 1360 S. OCEAN BLVD. Address: Address: POMPANO BCH., FL City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition KEISER, BELINDA Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: ARTHUR KEISER P 05/02/2005