2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Secretary of State DOCUMENT # 709056 02-21-2006 90015 003 ****61.25 1. Entity Name GLADES DAY SCHOOL, INC. Mailing Address Principal Place of Business GLADES DAY SCHOOL, INC. GLADES DAY SCHOOL, INC. 400 GATOR BLVD 400 GATOR BLVD BELLE GLADE, FL 33430 BELLE GLADE, FL 33430 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02092006 Chq-NP CR2E037 (11/05) City & State Applied For City & State 4. FEI Number 59-1101072 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHLECHTER, MIKE Street Address (P.O. Box Number is Not Acceptable) 627 SQUIRE DRIVE WELLINGTON, FL 33414 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Delete TITLE ☐ Change Addition TITLE NAME MOSS, LYNDA NAMĘ STREET ADDRESS 2827 BACOM POINT ROAD STREET ADDRESS CITY-ST-ZIP PAHOKEE, FL 33476 CITY-ST-ZIP □ Delete TITLE ☐ Change ☐ Addition TITLE STEIN, TIMOTHY NAME NAME STREET ADDRESS P.O. BOX 1092, 250 ROYAL PALM WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BELLE GLADE, FL 33430 ☐ Delete TITLE Change Addition TITLE LOHMANN, BRIAN NAME NAME 1109 N.E. 2ND STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BELLE GLADE, FL 33430 CITY-ST-ZIP TITLE ☐ Delete TITLE Director 🔀 Change ☐ Addition EDWARDS, EARLE E "CHIP" NAME NAME STREET ADDRESS STREET ADDRESS 325 FAST DELMONTE CITY-ST-ZIP CITY-ST-ZIP CLEWISTON, FL 33430 Addition TITLE ☐ Delete TITLE Change MCKINSTRY, JOHN E NAME NAME STREET ADDRESS STREET ADDRESS 4060 ROYAL PALM BEACH BLVD. City-St-7IP CITY-ST-ZIP ROYAL PALM BEACH, FL 33411 ☐ Addition ☐ Delete TITI F ☐ Change TITLE BURNS, CHERYL NAME NAME STREET ADDRESS 1001 N.E. 3RD STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BELLE GLADE, FL 33430 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

Mike Schlechter

FILED

2/10/2006

(561) 996-6769

Daytime Phone #

Feb 21, 2006 8:00 am

ATTACHMENT 60020174

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DOCUMENT #7,09056

GLADES DAY SCHOOL, INC. 400 GATOR BLVD. BELLE GLADE, FL 33430

ADDITIONAL OFFICERS AND DIRECTORS

TITLE:

D

NAME:

Robert Coker

ADDRESS:

111 Ponce De Leon Ave.

CITY-ST-ZIP:

Clewiston, FL 33430

TITLE:

D

NAME:

Paul Orsenigo P. O. Box 130

ADDRESS: CITY-ST-ZIP:

Belle Glade, FL 33430