

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715097

FILED
Mar 25, 2009
Secretary of State

Entity Name: THE CANTERBURY SCHOOL OF FLORIDA, INC.

Current Principal Place of Business:

990 62ND AVENUE NE
ST PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

990 62ND AVENUE NE
ST PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 59-1218022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, MAC H
990 62ND AVENUE N.E.
ST. PETERSBURG, FL 33702 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOBIESZ, MAUREEN D
Address: 739 GALEON DRIVE
City-St-Zip: TIERRA VERDE, FL 33715

Title: SD () Delete
Name: LEEPER, DANIEL J
Address: 2601 7TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: TD () Delete
Name: MCMULLEN, STEVE
Address: 690 APALACHEE CIRCLE NE
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: VPD () Delete
Name: POSEY, JOHN A
Address: 6125 PASADENA POINT BOULEVARD
City-St-Zip: GULFPORT, FL 33707

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAUREEN D. DOBIESZ

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date