2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2009
Secretary of State

DOCUMENT# 749931

Entity Name: HALIFAX MONTESSORI SCHOOL, INC.

Current Principal Place of Business:

3749 NOVA RD
PORT ORANGE, FL 32129 US

New Principal Place of Business:

Current Mailing Address:

3749 NOVA RD
PORT ORANGE, FL 32129 US

New Mailing Address:

FEI Number: 59-1948990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCOTTY, J WAYNE
6074 SABAL HAMMOCK CIRCLE
PORT ORANGE, FL 32128 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:	PTD	( ) Delete
Name:	SCOTTY, J. WAYNE	
Address:	6074 SABAL HAMMOCK CIRCLE	
City-St-Zip:	PORT ORANGE, FL 32128	
Title:	D	( ) Delete
Name:	SCOTTY, JOHN G	
Address:	1450 ATLANTIC SHORES BLVD #217	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	STD	( ) Delete
Name:	SCOTTY, DIANE E.	
Address:	6074 SABAL HAMMOCK CIRCLE	
City-St-Zip:	PORT ORANGE, FL 32128	
Title:	D	( ) Delete
Name:	SCOTTY, SHEAE	
Address:	12044 COBBLEWOOD LANE NORTH	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:	D	( ) Delete
Name:	MACKAY, KRISTINE	
Address:	40 SEA HARBOR DR WEST	
City-St-Zip:	ORMOND BEACH, FL 32176	
Title:	D	( ) Delete
Name:	WESTON, SARA S	
Address:	2001 S. MO PAC EXPY #1625	
City-St-Zip:	AUSTIN, TX 78746	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	SCOTTY, JOHN G	
Address:	4200 HILLCREST DRIVE #1009	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	CAFFEY, SHEA	
Address:	415 ROLLING ROCK COURT	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	WESTON, SARA S	
Address:	5805 TRAVIS GREEN LANE	
City-St-Zip:	AUSTIN, TX 78735	

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: J.WAYNE SCOTTY PTD 05/24/2009

Electronic Signature of Signing Officer or Director — Date