2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749931

FILED Mar 14, 2010 Secretary of State

Entity Name: HALIFAX MONTESSORI SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business:

3749 NOVA RD

PORT ORANGE, FL 32129 US

Current Mailing Address: New Mailing Address:

3749 NOVA RD

PORT ORANGE, FL 32129 US

FEI Number: 59-1948990 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:

SCOTTY, J WAYNE 6074 SABAL HAMMOCK CIRCLE PORT ORANGE, FL 32128 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

OFFICERS AND DIRECTORS:

Title: PTD

Name: SCOTTY, J. WAYNE

Address: 6074 SABAL HAMMOCK CIRCLE City-St-Zip: PORT ORANGE, FL 32128

Title: D

Name: SCOTTY, JOHN G

Address: 4200 HILLCREST DRIVE #1009 City-St-Zip: HOLLYWOOD, FL 33021

Title: STD

Name: SCOTTY, DIANE E.

Address: 6074 SABAL HAMMOCK CIRCLE City-St-Zip: PORT ORANGE, FL 32128

Title: [

Name: CAFFEY, SHEA

Address: 415 ROLLING ROCK COURT City-St-Zip: JACKSONVILLE, FL 32225

Title:

Name: MACKAY, KRISTINE
Address: 40 SEA HARBOR DR WEST
City-St-Zip: ORMOND BEACH, FL 32176

Title: [

Name: WESTON, SARA S Address: 5805 TRAVIS GREEN LANE City-St-Zip: AUSTIN, TX 78735

I hereby 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 all other like empowered.

SIGNATURE: J. WAYNE SCOTTY PTD 03/14/2010