

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761687

FILED  
Apr 18, 2012  
Secretary of State

**Entity Name:** THE CORNERSTONE SCHOOL, INC.

**Current Principal Place of Business:**

2313 S.E. LAKEWEIR ROAD  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

2313 S.E. LAKEWEIR ROAD  
OCALA, FL 34471 US

**New Mailing Address:**

**FEI Number:** 59-2217451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRABB, SUSAN CPA  
2215 SE FT.KING STREET  
SUITE #B  
OCALA, FL 34471 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: D  
Name: WASSERFALL, INGRID  
Address: 2313 SE LAKE WEIR RD  
City-St-Zip: Ocala, FL 34471

Title: O  
Name: DOMFORT, JEFF  
Address: 663 SE 19TH ST  
City-St-Zip: Ocala, FL 34471

Title: O  
Name: POOL, CORY  
Address: 4179 SW 43RD CIRCLE  
City-St-Zip: Ocala, FL 34474

Title: O  
Name: CRABB, SUSAN D  
Address: 2215 SE FT KING ST, STE B  
City-St-Zip: Ocala, FL 34471

Title: O  
Name: FOCKLER, INGO  
Address: 2709 SE 45TH AVE  
City-St-Zip: Ocala, FL 34480

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:** SUSAN D CRABB

O

04/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date