2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770409

FILED Mar 29, 2007 Secretary of State

Entity Name: SEACREST SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business: 7100 DAVIS BLVD NAPLES, FL 34104 US **Current Mailing Address: New Mailing Address:** 7100 DAVIS BLVD NAPLES, FL 34104 US FEI Number: 59-2311341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MURPHY, JAMES 110 CENTRAL AVENUE NAPLES, FL 34102 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GOLDSMITH, JAN HASTINGS, BARRY Name: Name: 447 1ST AVENUE NORTH Address: 3125 RUM ROW Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 Title: VC Title: (X) Change () Addition () Delete Name: HASTINGS, BARRY Name: ERICKSON, TRISH MRS Address: 3125 RUM ROW Address: 3100 REGATTA ROAD City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34103 Title: () Delete Title: () Change () Addition POWELL, LYNNE Name: Name: 2319 QUEENS WAY Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: VC () Delete Title: (X) Change () Addition ERICKSON, TRISH Name: Name: MURPHY, JAMES 3100 REGATTA ROAD Address: Address: 1150 CENTRAL AVENUE City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34102 Title: (X) Delete Title: () Change () Addition SZABO, CHARLES Name: Name: 1795 GORDON DR Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: () Change () Addition AMICO, DAVID Name: Name: Address: 2333 KINGS LAKE BLVD Address: NAPLES, FL 34112 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES MURPHY SEC 03/29/2007