

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90033 032 ***158.75

DOCUMENT # H25294

1. Entity Name
MALENA'S MINI SCHOOL, INC.



Principal Place of Business
**C/O MAHALA LENA CRAWFORD
9318 PENSACOLA BLVD.
PENSACOLA, FL 32534**

Mailing Address
**7181 PINE FOREST RD.
PENSACOLA, FL 32526**

94023469



DO NOT WRITE IN THIS SPACE

01052004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2472729

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MOREHOUSE, MAHALA LENA
9318 PENSACOLA BLVD.
PENSACOLA, FL 32514**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRAWFORD, MAHALA LENA 45 HOWARD DRIVE PENSACOLA, FL
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mahala L. Morehouse
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-04 850-478-5133
Date Daytime Phone #