

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J71327

Entity Name: AVALON SCHOOL, INC.

FILED
Jul 01, 2005
Secretary of State

Current Principal Place of Business:

5002 ANDRUS AVE.
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

5002 ANDRUS AVE.
ORLANDO, FL 32804 US

New Mailing Address:

FEI Number: 59-2811582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAFER, ROBERT P
5002 ANDRUS AVE
ORLANDO, FL 32804 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHAFER, ROBERT P.,
Address: 5318 WOODCREST DR., NO.
City-St-Zip: WINTER PARK, FL

Title: V () Delete
Name: SHAFER, KATHERINE
Address: 5318 WOODCREST DR. NORTH
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHAFER, ROBERT P.,
Address: 215 COLONY SPRINGS LN
City-St-Zip: MAITLAND, FL 32751

Title: V (X) Change () Addition
Name: SHAFER, KATHERINE
Address: 215 COLONY SPRINGS LN
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT SHAFER

PRES

07/01/2005

Electronic Signature of Signing Officer or Director

Date