

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 29, 2008 08:00 AM
Secretary of State

DOCUMENT # K54546

1. Entity Name
BEEMAN PARK PREPARATORY SCHOOL, INC.



Principal Place of Business
**2300 RIDGE AVE
ORLANDO, FL 32803**

Mailing Address
**2300 RIDGE AVE
ORLANDO, FL 32803**



05272008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2923042	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SMITH, NORMAN E
4509 FONT ANA ST.
ORLANDO, FL 32807**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

U000000952134

06/04/08-80868-012-150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	SMITH, CLARA E
STREET ADDRESS	4509 FONTANA ST.
CITY-ST-ZIP	ORLANDO, FL
TITLE	T
NAME	SMITH, NORMAN E
STREET ADDRESS	4509 FONTANA ST.
CITY-ST-ZIP	ORLANDO, FL
TITLE	S
NAME	SMITH, C. ELAINE
STREET ADDRESS	1253 NOTTINGHAM ST.
CITY-ST-ZIP	ORLANDO, FL
TITLE	P
NAME	SMITH, N. JEANNE
STREET ADDRESS	2310 RIDGE AVENUE
CITY-ST-ZIP	ORLANDO, FL 32803
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Norman E. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER

5-27-08

407-277-0211

Date

Daytime Phone #