## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001447

Entity Name: FRIENDS OF MONTESSORI, INC.

FILED May 28, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

509 E. PENNSYLVANIA AVENUE DELAND, FL 32724

**Current Mailing Address: New Mailing Address:** 

509 E. PENNSYLVANIA AVENUE DELAND, FL 32724

FEI Number: 59-3630362 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

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

KING, CAMILLE T CLEARMAN, FRANCES 1109 E. UNIVERSITY AVE. 271 PARK AVE

ORANGE CITY, FL 32763 US DELAND, FL 32724

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: KIM MARTIN 05/28/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ORMOND BEACH, FL 32174

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

HAGAN, JAMES A LONG, MARK Name: Name: 401 SOUTH LAKE VICTORIA CIRCLE Address: 518 W. HOWRY AVE Address:

City-St-Zip: DELAND, FL 32724 City-St-Zip: DELAND, FL 32720

Title: ( ) Delete Title: (X) Change ( ) Addition ORFINGER, MIKE Name: SCHULTHEIS, ALICIA Name: Address: 27 IROQUOIS TR. Address: 336 CROOKED TREE TRAIL

City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: DELAND, FL 32724

Title: DP () Delete Title: (X) Change ( ) Addition KING, CAMILLE Name: MONROE, TERESA Name:

1109 E UNIVERSITY AVE 711 PINE TREE TERRACE Address: Address: City-St-Zip: DELAND, FL 32724 City-St-Zip: DELAND, FL 32724

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

RAUSCH, PATTI Name: Name: CLEARMAN, FRANCES 2781 WHITEHURST RD. Address: Address: 271 PARK AVE City-St-Zip: DELAND, FL 32720 City-St-Zip: ORANGE CITY, FL 32763

Title: Title: () Change () Addition

() Delete MARTIN, KIM Name: Name: 47 SHADOW CREEK WAY Address: Address:

Title: () Delete Title: (X) Change ( ) Addition

COOPER, STEPHEN A STAM. RUSSELL Name: Name: Address: 814 OAK TREE TERRACE Address: 207 EAST SECOND AVE PIERSON, FL 32180 DELAND, FL 32724 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: KIM MARTIN DR 05/28/2008