2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State
04-12-2004 90299 050 ****70.00

DOCUMENT # N00000006341

1. Entity Name
SEMINOLE PREPARTORY SCHOOL, INC.

Principal Place of Business	Mailing Address
6101 N HABANA AVE TAMPA, FL 33614	6101 N HABANA AVE TAMPA, FL 33614

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03032004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3698938 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PECK, HOWARD 6101 N HABANA AVE TAMPA, FL 33614	Name: Ron Whipple Street Address (P.O. Box Number is Not Acceptable): 6101 N. Habana Ave City: Tampa FL Zip Code: 33614

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: Ron Whipple (R. WHIPPLE) Schoolmaster DATE: 3/3/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAIN, ALASTAIR 6101 N. HABANA AVENUE TAMPA, FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Brown, Louis 6101 N. Habana Ave Tampa Fl. 33614	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT BECKEL, JACOB 6101 N. HABANA AVENUE TAMPA, FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Cobb, Michael 6101 N. Habana Ave Tampa Fl 33614	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANTIAGO, KAREN 6101 N. HABANA AVENUE TAMPA, FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Dearolf, Wanda 6101 N. Habana Ave Tampa Fl 33614	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT BLUE, JOE 6101 N. HABANA AVENUE TAMPA, FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Helms, Melissa 6101 N. Habana Ave Tampa, FL 33614	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAERWALDE, ROBERT 6101 N HABAR AVE TAMPA, FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Keiper, Paul 6101 N. Habana Ave Tampa FL 33614	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, SCOTT 6101 N HARBANA AVE TAMPA, FL 33614	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Reinke, Rick 6101 N. Habana Ave Tampa FL 33614	☐ Change ☒ Addition

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 617, 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: Joseph M. Blue Joseph M. Blue Treasurer March 18, 2004 (813) 872-6744 x224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

N00000063 41

Additions to block 11

Title: D
Name: Santiago, Karen
Address: 6101 N. Habana Avenue
Tampa, FL 33614

Title: D
Name: Willis, Mike
Address: 6101 N. Habana Avenue
Tampa, FL 33614