

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001215

FILED  
Feb 07, 2008  
Secretary of State

**Entity Name:** ISLAND VILLAGE MONTESSORI CHARTER SCHOOL, INC.

**Current Principal Place of Business:**

2001 PINEBROOK RD  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

2001 PINEBROOK RD  
VENICE, FL 34292

**New Mailing Address:**

**FEI Number:** 65-1067095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ELDER, KIMBERLY P  
599 OLD ALBEE FARM RD  
NOKOMIS, FL 34275 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SPURLIN, WARREN  
Address: 9000 MIDNIGHT PASS RD  
City-St-Zip: SARASOTA, FL 34242

Title: T ( ) Delete  
Name: MUNTZ, KINDRA  
Address: 5869 VENISOTA RD.  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: RENNA, RONALD P  
Address: 4364 NW 103 TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: D ( ) Delete  
Name: THOMPSON, WHELMMA  
Address: 1825 COLLEEN ST  
City-St-Zip: SARASOTA, FL 34231

Title: VP ( ) Delete  
Name: PEARMAN, ROBERT  
Address: 496 SHADE DR EAST  
City-St-Zip: VENICE, FL 34293

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: KIMBERLY ELDER

RA

02/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date