2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005162

FILED Apr 06, 2009 Secretary of State

Entity Name: MILESTONES COMMUNITY SCHOOL OF LAKE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 10516 TREADWAY SCHOOL ROAD LEESBURG, FL 34788 **Current Mailing Address: New Mailing Address:** 10516 TREADWAY SCHOOL ROAD LEESBURG, FL 34788 FEI Number: 59-3731705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBERTS, NICOLA 1982 LEWIS TURNER BLVD. SUITE D FORT WALTON BEACH, FL 32547 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HENDERSON, JOAN Name: Name: 72 BOB-BO LANE Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: () Delete Title: (X) Change () Addition HATHAWAY, GREG Name: NICOLAS, NOELLE Name: Address: 5334 LAKE STREET Address: 36231 SPIRIT COURT City-St-Zip: TANGERINE, FL 32777 City-St-Zip: GRAND ISLAND, FL 32735 Title: DC () Delete Title: DS (X) Change () Addition BEAL, MARK FARLING, REBECCA Name: Name: 1718 ERROLWOODS DRIVE 9259 SILVER LAKE DRIVE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: LEESBURG, FL 34788 Title: () Delete Title: (X) Change () Addition Name: SHREINER, DEBORAH Name: SEMENOV, AMY 41906 NORTH EMERALDA ISLAND RD. Address: Address: 1704 19TH STREET LEESBURG, FL 34788 City-St-Zip: City-St-Zip: NICEVILLE, FL 32578 Title: () Delete Title: DC (X) Change () Addition RADAR, JIM RADER, JIM Name: Name: 12108 HELENA COURT 12109 HELENA COURT Address: Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788

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: AMY SEMENOV D 04/06/2009