

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008422

FILED  
Mar 11, 2010  
Secretary of State

**Entity Name:** LAKE MARY MONTESSORI ACADEMY, INC.

**Current Principal Place of Business:**

3551 W LAKE MARY BLVD STE 205  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

1100 CLINGING VINE PLACE  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

3551 W LAKE MARY BLVD STE 205  
LAKE MARY, FL 32746

**FEI Number:** 03-0391610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LINVILLE, SCOTT  
1100 CLINGING VINE PL  
WINTER SPRINGS, FL 32708 US

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

LINVILLE, SCOTT  
3551 W LAKE MARY BLVD STE 205  
LAKE MARY, FL 32746 US

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:**

03/11/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DVST  
**Name:** LINVILLE, SCOTT  
**Address:** 3551 W. LAKE MARY BLVD STE 205  
**City-St-Zip:** LAKE MARY, FL 32746

**Title:** DP  
**Name:** LINVILLE, SHEILA  
**Address:** 3551 W. LAKE MARY BLVD STE 205  
**City-St-Zip:** LAKE MARY, FL 32746

**Title:** D  
**Name:** ELLIOTT, ROBERT  
**Address:** 155 SEMINOLE DR  
**City-St-Zip:** DEBARY, FL 32713

I hereby 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 all other like empowered.

**SIGNATURE:** SCOTT LINVILLE

DVST

03/11/2010

Electronic Signature of Signing Officer or Director

Date