

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 15, 2005
Secretary of State

DOCUMENT# N02000005431

Entity Name: MASADA ACADEMY OF LEARNING, INC.**Current Principal Place of Business:**2008 ROOKERY BAY DRIVE
APT. # 1107
NAPLES, FL 34114**New Principal Place of Business:**2231 SAN MARCO ROAD
MARCO ISLAND, FL 34145**Current Mailing Address:**2008 ROOKERY BAY DRIVE
APT. #1107
NAPLES, FL 34114**New Mailing Address:**2231 SAN MARCO ROAD
MARCO ISLAND, FL 34145**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CALISH, SHERYL H
2008 ROOKERY BAY DRIVE
APT. # 1107
NAPLES, FL 34114 US**Name and Address of New Registered Agent:**CALISH, SHERYL H
2231 SAN MARCO ROAD
MARCO ISLAND, FL 34145 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:

08/15/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: CALISH, SHERYL H
Address: 2008 ROOKERY BAY DRIVE
City-St-Zip: NAPLES, FL 34114Title: D () Delete
Name: COX, PATRICK D
Address: 2008 ROOKERY BAY DRIVE
City-St-Zip: NAPLES, FL 34114Title: D () Delete
Name: BROWN, CHRISTINE
Address: 7363 CIRCLE DRIVE
City-St-Zip: LADY LAKE, FL 32159**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: CALISH, SHERYL H
Address: 2231 SAN MARCO ROAD
City-St-Zip: MARCO ISLAND, FL 34145Title: D (X) Change () Addition
Name: COX, PATRICK D
Address: 2231 SAN MARCO ROAD
City-St-Zip: MARCO ISLAND, FL 34145Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHERYL H. CALISH

D

08/15/2005

Electronic Signature of Signing Officer or Director

Date