2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006696

Entity Name: BREVARD MONTESSORI PRIVATE SCHOOL, INC.

FILED Mar 25, 2004 Secretary of State

ncipal Place of Business:
i

944 PINETREE DR.

INDIAN HARBOR BEACH, FL 32937 US

Current Mailing Address: New Mailing Address:

944 PINETREE DR. INDIAN HARBOR BEACH, FL 32937

FEI Number: 59-3522407 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:

MCDONALD, SANDY 944 PINETREE DR.

INDIAN HARBOR BEACH, FL 32937 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:

L. _____

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: VILLE, MIKE Name: CURRAN, JOHN

Name: VILLE, MIKE Name: CORRAN, JOHN
Address: 18 BRENDA CT Address: 440 BAY POINT DRIVE

City-St-Zip: SATELLITE BEACH, FL 32937 Address: 440 BAT FOINT DRIVE

Title: () Delete Title: (X) Change () Addition THELANDER, MICHAEL Name: Name: MAYERHOEFFER, NICOLAS Address: 1689 PALM RIDGE RD Address: 363 ALBACORE PLACE City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE BEACH, FL 32951

Title: T () Delete Title: T (X) Change () Addition Name: BUDNICK, KIMBERLY Name: FERRARA, TERESA

Address: 2031 SYKES CREEK DR Address: 392 PEREGRINE DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete Title: (X) Change () Addition Name: MARTIN, HOLLY Name: SILVERMAN, MICHELLE 920 MAPLE RIDGE RD 4655 LAKE WASHINGTON RD. Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: MELBOURNE, FL 32934

Title: D () Delete Title: D (X) Change () Addition

 Name:
 VICE, ELIZABETH
 Name:
 ALVAREZ, ROSARY

 Address:
 2012 KENT ST NE
 Address:
 720 S. ROBIN WAY

City-St-Zip: PALM BAY, FL 32907 City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP (X) Delete Title: () Change () Addition

 Name:
 HOLM, MIKE
 Name:

 Address:
 891 PEREGRINE DR
 Address:

 City-St-Zip:
 INDIALANTIC, FL 32903
 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: TERESA FERRARA T 03/25/2004