

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006696

FILED  
Jan 12, 2011  
Secretary of State

**Entity Name:** BREVARD MONTESSORI PRIVATE SCHOOL, INC.

**Current Principal Place of Business:**

1130 SOUTH PATRICK DR.  
SATELLITE BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

1130 SOUTH PATRICK DR.  
SATELLITE BEACH, FL 32937 US

**New Mailing Address:**

**FEI Number:** 59-3522407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDONALD, SANDY  
1130 SOUTH PATRICK DR.  
SATELLITE BEACH, FL 32937 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  
**Name:** WILSON, JOEL  
**Address:** 450 COACH RD.  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** VP  
**Name:** FORCIER, TARA  
**Address:** 450 COACH RD.  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** T  
**Name:** NACE, JACKIE  
**Address:** 169 GLENWOOD AVE.  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** S  
**Name:** MARTIN, MAGGIE  
**Address:** 389 HARWOOD AVE  
**City-St-Zip:** SATELLITE BEACH, FL 32937

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:** SANDRA MCDONALD

DIR

01/12/2011

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

\_\_\_\_\_  
Date