N03000005783

(Requestor's Name)
CRESTWELL SCHOOL 1901 PARK MEADOWS DRIVE FORT MYERS, FL 33907 (239) 481-4478
(City/State/Zip/Phone #)
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(Business Entity Name)
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EXAMINER

*--• STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State ofFLOR1DA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: <u>LRESTWELL HIGHER LEARNING SCHOOL</u> 2. The principal office address: <u>KNOWN AS CRESTWELL SCHOOL</u> IN 1901 PARK MEADOWS, FORT MYERS, FL
3. The mailing address (if different):
4. Date of incorporation/qualification: 7-8-2003 Document number: ND300000578
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) ANDREW SERVICE CORP. OF FLORIDA 201 N. FRANKLIN STREET
TAMPA: TZ. 33602 US 6. The name and street address of the next registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): MARIE ANN SHARPE 1901 PARK HEADOWS DRIVE P.O. Box NOT acceptable FORT MYERS, FZ. 33907
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. PRESIDENT TRUSTEE Finited or typed name and title I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if, this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. Mule United Registered Agent
If signing on behalf of an entity: Cindy Buttefield Typed or Printed Name * * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)