

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 08, 2011
Secretary of State

Entity Name: SOUTH WALTON MONTESSORI ACADEMY, INC.

Current Principal Place of Business:

101 EDEN GARDEN RD
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

101 EDEN GARDEN RD
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-0357959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRANKLIN H. WATSON, P.A.
5365 E CO HWY 30-A STE 105
SEAGROVE BCH, FL 32459 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: TRS
Name: LAPLANTE, JON
Address: 31 WINDWARD LN
City-St-Zip: ROSEMARY BCH, FL 32461

Title: TR
Name: LISCHKA, KURT
Address: 66 EVE CIRCLE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: TRP
Name: CASAS, LEO
Address: PO BOX 4818
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: TR
Name: BEALL, CATHERINE
Address: 103 TWILIGHT BAY DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: TRP
Name: SEIN, JAY
Address: 92 W WILD BLUEBERRY
City-St-Zip: SANTA ROSA BEACH, FL 32359

Title: TR
Name: BRADLEY, LORI
Address: PO BOX 611543
City-St-Zip: ROSEMARY BEACH, FL 32461

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: CATHERINE D. BEALL

TR

02/08/2011

Electronic Signature of Signing Officer or Director

Date