## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009296

FILED Feb 13, 2012 Secretary of State

Entity Name: SOUTH WALTON MONTESSORI ACADEMY, INC.

Current Principal Place of Business: New Principal Place of Business:

101 EDEN GARDEN RD

SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

101 EDEN GARDEN RD SANTA ROSA BEACH, FL 32459

FEI Number: 20-0357959 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FRANKLIN H. WATSON, P.A. 5365 E CO HWY 30-A STE 105 SEAGROVE BCH, FL 32459 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: 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 02/13/2012