

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002195

FILED
Feb 10, 2009
Secretary of State

Entity Name: BERKLEY ACCELERATED MIDDLE SCHOOL, INC.

Current Principal Place of Business:

5316 BERKLEY ROAD
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

5316 BERKLEY ROAD
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 45-0536309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLENDER, JILL J
105 WEST JULIANA WAY
AUBURNDALE, FL 33823 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: D () Delete
Name: BRAUCKMULLER, CHRIS
Address: PO BOX 3669
City-St-Zip: WINTER HAVEN, FL 33885

Title: D () Delete
Name: CLARK-JOHNSON, JENNIFER D
Address: 118 SHADDOCK DRIVE
City-St-Zip: AUBURDALE, FL 33823

Title: D () Delete
Name: THOMPSON, CHRIS
Address: 667 OLD BERKLEY ROAD
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: MULLING, KEVIN
Address: 5316 BERKLEY ROAD
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: VANDERPOOL, WILLIAM M JR.
Address: 4898 LAKE JULIANA RESERVE
City-St-Zip: AUBURNDALE, FL 33823

Title: P () Delete
Name: BOLENDER, JILL J
Address: 105 WEST JULIANA WAY
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BRAUCKMULLER, CHRIS
Address: 128 FLAMINGO DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: D (X) Change () Addition
Name: RINER, MEERA
Address: 513 HILLSIDE DRIVE
City-St-Zip: AUBURDALE, FL 33823

Title: D (X) Change () Addition
Name: THOMPSON, CHRIS
Address: 5414 OLD BERKLEY ROAD
City-St-Zip: AUBURNDALE, FL 33823

Title: D (X) Change () Addition
Name: MULLING, KEVIN
Address: 1506 AUBURN OAKS BLVD
City-St-Zip: AUBURNDALE, FL 33823

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: THOMPSON, WILLIAM
Address: PO BOX 222
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JILL BOLENDER

P

02/10/2009

Electronic Signature of Signing Officer or Director

Date