2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2007
Secretary of State

DOCUMENT# N05000003921

Entity Name: EINSTEIN MONTESSORI ACADEMY, INC.

Current Principal Place of Business:

5650 HWY 520
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

5650 HWY 520
COCOA, FL 32926

New Mailing Address:

FEI Number: 20-2702582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SULLIVAN, LEA ANN
5300 CITRUS BLVD
COCOA, FL 32926 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 ( ) Delete
Name: OSBRACH, DENISE L
Address: 1255 FAULKINGHAM ROAD
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP ( ) Delete
Name: HICKS, LILLIAN
Address: 1125 HWY 608
City-St-Zip: SATELLITE BEACH, FL 32935

Title: TRES ( ) Delete
Name: JUHR, PAMELA
Address: 4917 CORFU DRIVE
City-St-Zip: COCOA, FL 32926

Title: SEC (X) Delete
Name: JUHR, PAMELA
Address: 4917 CORFU DRIVE
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TRES (X) Change ( ) Addition
Name: SULLIVAN, LEA ANN
Address: 5300 CITRUS BLV
City-St-Zip: COCOA, FL 32926

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LEA ANN SULLIVAN OFF 01/30/2007

Electronic Signature of Signing Officer or Director — Date