

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004978

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** GULLIVER SCHOOLS FOUNDATION, INC.

**Current Principal Place of Business:**

C/O JOSE E. FUENTE  
1500 SAN REMO AVENUE, SUITE 400  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOSE E. FUENTE  
1500 SAN REMO AVENUE, SUITE 400  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 20-3459080

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATTS-FITZGERALD, ABIGAIL C  
C/O HUNTON & WILLIAMS LLP  
1111 BRICKELL AVENUE, SUITE 2500  
MIAMI, FL 33131 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  
Name: WATTS-FITZGERALD, ABIGAIL  
Address: 1500 SAN REMO AVE PH 400  
City-St-Zip: MIAMI, FL 33146

Title: D  
Name: FUENTE, JOSE E  
Address: 1500 SAN REMO AVE. PH 400  
City-St-Zip: CORAL GABLES, FL 33146

Title: D  
Name: KRUTULIS, JOHN W  
Address: 1500 SAN REMO AVE. PH 400  
City-St-Zip: CORAL GABLES, FL 33146

Title: D  
Name: BARTEL, JEFFREY S  
Address: 1500 SAN REMO AVE. PH 400  
City-St-Zip: CORAL GABLES, FL 33146

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:** JOSE FUENTE

D

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date