

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2008 8:00 am
Secretary of State

03-19-2008 90026 041 ****61.25

DOCUMENT # N05000008611	
1. Entity Name SONHAVEN PREPARATORY ACADEMY, INC.	

Principal Place of Business 3805 NORTH LOCKWOOD RIDGE SARASOTA FL 34232	Mailing Address P.O. BOX 50517 SARASOTA FL 34232
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 20-3241073	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HILT, THOMAS H 5351 AVANT AVENUE SARASOTA FL 34235	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	Signature, typed or printed name of registered agent and title, if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	☐ Delete
NAME	HILT, CAROLYN
STREET ADDRESS	5351 AVANT AVE
CITY-ST-ZIP	SARASOTA FL 34235
TITLE	☒ Delete
NAME	CLARK, JAMES L
STREET ADDRESS	4219 2ND AVENUE EAST EDGE
CITY-ST-ZIP	BRADENTON FL 34208
TITLE	☐ Delete
NAME	HILT, THOMAS H
STREET ADDRESS	5351 AVANT AVENUE
CITY-ST-ZIP	SARASOTA FL 34235
TITLE	☐ Delete
NAME	RUDISILL, DAVID A
STREET ADDRESS	2115 ARDEN DRIVE
CITY-ST-ZIP	SARASOTA FL 34232
TITLE	☐ Delete
NAME	WORTHLEY, WARREN M
STREET ADDRESS	3333 MAPLE HAMMOCK DR
CITY-ST-ZIP	SARASOTA FL 34235
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☒ Addition
NAME	D. Travis Bond
STREET ADDRESS	1070 Timberidge Ln.
CITY-ST-ZIP	Bartonville, TX 76226
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas H. Hilt* *March 8, 2008*