## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000698

FILED Jan 06, 2010 Secretary of State

Entity Name: MASCOTTE ELEMENTARY SCHOOL, INC.

US

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

460 MIDWAY AVE MASCOTTE, FL 34753

Current Mailing Address: New Mailing Address:

460 MIDWAY AVE MASCOTTE, FL 34753

FEI Number: 86-1171434 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STONE & GERKEN, PA 4850 N. HIGHWAY 19A MOUNT DORA, FL 32757

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: MR.

Name: SANFORD, STEPHEN Address: 3737 INDIGO ROAD City-St-Zip: GROVELAND, FL 34736

Title: MR.

Name: RUBIO, JOSE

Address: 102 LAKE CATHERINE CIRCLE City-St-Zip: GROVELAND, FL 34736

Title: MRS.

Name: VILLANUEVA, ELIZABETH
Address: 210 PEARL STREET
City-St-Zip: MASCOTTE, FL 34753

Title: MR.

 Name:
 STONE, LEWIS W

 Address:
 4850 N HIGHWAY 19A

 City-St-Zip:
 MOUNT DORA, FL 32757

Title: MR.

Name: COCKCROFT, WAYNE
Address: 11928 CYPRESS LANDING AVE

City-St-Zip: CLERMONT, FL 34711

Title: MRS.

Name: JONES, JOANN DR.
Address: CYPRESS LANDING AVE
City-St-Zip: CLERMONT, FL 34711

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: WAYNE COCKCROFT MR. 01/06/2010