

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005689

FILED
Jan 19, 2007
Secretary of State

Entity Name: ABC SCHOOL HOUSE OF SANFORD, INC.

Current Principal Place of Business:

2525 S. OAK AVE.
SANFORD, FL 32773

New Principal Place of Business:

3550 N. GOLDENROD RD.
WINTER PARK, FL 32792

Current Mailing Address:

2525 S. OAK AVE.
SANFORD, FL 32773

New Mailing Address:

3550 N. GOLDENROD RD
WINTER PARK, FL 32792

FEI Number: 20-4945313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHOMUTETSKY, HYNDI
1504 PEBBLE BAY COVE
ORLANDO, FL 32828 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: KHOMUTETSKY, HYNDI
Address: 2525 S. OAK AVE.
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: BARBER, BOBBI
Address: 2525 S. OAK AVE.
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: TIMMONS, JAMES
Address: 2525 S. OAK AVE.
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KHOMUTETSKY, HYNDI
Address: 3550 N. GOLDENROD RD
City-St-Zip: WINTER PARK, FL 32792

Title: D (X) Change () Addition
Name: BARBER, BOBBI
Address: 3550 N. GOLDENROD RD.
City-St-Zip: WINTER PARK, FL 32792

Title: D (X) Change () Addition
Name: TIMMONS, JAMES
Address: 2041 E. LAKE MARY BLVD
City-St-Zip: SANFORD, FL 32773

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: HYNDI KHOMUTETSKY

D

01/19/2007

Electronic Signature of Signing Officer or Director

Date