

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006236

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: MONTESSORI MULTICULTURAL SCHOOL, INC.

**Current Principal Place of Business:**

13411 SHIRE LANE  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

13411 SHIRE LANE  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 20-4971719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HORN, FRAN  
1091 7TH WAY  
NORTH FORT MYERS, FL 33903 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: ED ( ) Delete  
Name: GUENTHER, JILL  
Address: 4528 PALM TREE BLVD  
City-St-Zip: CAPE CORAL, FL 33904

Title: ED ( ) Delete  
Name: FRAN, HORN  
Address: 1091 7TH WAY  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: T (X) Delete  
Name: HERCEK, NOEL  
Address: 1571 GROVE AVENUE  
City-St-Zip: FORT MYERS, FL 33901

Title: ED (X) Delete  
Name: ROSENTHAL, LOREN  
Address: 13060 IDYLVILD RD  
City-St-Zip: FT MYERS, FL 33905

Title: P ( ) Delete  
Name: KELLEY, KENT  
Address: 14770 ROYAL OAK CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: VP (X) Change ( ) Addition  
Name: CICHY, TODD  
Address: 2431 SUNRISE BLVD  
City-St-Zip: FORT MYERS, FL 33907

Title: D ( ) Change (X) Addition  
Name: GONZALEZ, MARGE  
Address: 4528 PALM TREE BLVD  
City-St-Zip: CAPE CORAL, FL 33904-848

I hereby certify that the information supplied with this filing does not qualify 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: FRAN HORN

ED

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date