

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007886

FILED
May 01, 2009
Secretary of State

Entity Name: WINDSOR ACADEMY, INC.

Current Principal Place of Business:

838 NW 183RD STREET
SUITE 206
MIAMI GARDENS, FL 33169

New Principal Place of Business:

13301 NW 24TH AVEUE
MIAMI, FL 33167

Current Mailing Address:

17809 SW 54TH STREET
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: 20-5924060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND STREET, 4TH FLOOR
MIAMI, FL 33145 US

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: P () Delete
Name: WINDSOR-BUTLER, SABRINA
Address: 17809 SW 54 STREET
City-St-Zip: MIRAMAR, FL 33029

Title: VP () Delete
Name: BUTLER, KEITH S SR.
Address: 17809 SW 54 STREET
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SABRINA WINDSOR BUTLER

P

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date