

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000009380

FILED  
Oct 29, 2009  
Secretary of State

Entity Name: SWEDISH SCHOOL OF TAMPA BAY INC.

## Current Principal Place of Business:

8318 GOLDEN PRARIE DR  
TAMPA, FL 33647 US

## New Principal Place of Business:

## Current Mailing Address:

8318 GOLDEN PRARIE DR  
TAMPA, FL 33647 US

## New Mailing Address:

FEI Number: 20-5490320      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

SKANTZE, JOHAN  
8318 GOLDEN PRAIRIE DR  
TAMPA, FL 33647 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: JOHAN SKANTZE

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SKANTZE, JOHAN C  
Address: 8318 GOLDEN PRAIRIE DR  
City-St-Zip: TAMPA, FL 33647 US

Title: S ( ) Delete  
Name: SAMUELSSON, MALIN  
Address: 17721 SUNRISE DR  
City-St-Zip: LUTZ, FL 33549 US

Title: T (X) Delete  
Name: ORELLANO, LEONARDO  
Address: 13019 ARBORVIEW PLACE  
City-St-Zip: TAMPA, FL 33618 US

Title: VP (X) Delete  
Name: WOLF, MARIA  
Address: 19105 ST LAURENT DR  
City-St-Zip: LUTZ, FL 33558

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: SKANTZE, JOHAN C  
Address: 8318 GOLDEN PRAIRIE DR  
City-St-Zip: TAMPA, FL 33647 US

Title: P (X) Change ( ) Addition  
Name: WOLF, MARJA  
Address: 19105 ST LAURENT DR  
City-St-Zip: LUTZ, FL 33558

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: JOHAN SKANTZE

T

10/29/2009

Electronic Signature of Signing Officer or Director

Date