## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000000443

FILED Apr 15, 2009 Secretary of State

Entity Name: BATT SCHOOL FOR INTERNATIONAL LEADERSHIP, INC.

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

13205 US HWY. ONE, SUITE 202 JUNO BCH, FL 33408

Current Mailing Address: New Mailing Address:

13205 US HWY. ONE, SUITE 202 JUNO BCH, FL 33408

FEI Number: 26-4195133 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:

UNITED STATES CORPORATION AGENTS, INC. YARNELL, JUDITH D

1111 LINCOLN RD., SUITE 400 13205 U S HIGHWAY ONE SUITE 202 MIAMI BCH, FL 33139 US JUNO BEACH, FL 33408 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: JUDITH YARNELL 04/15/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 BATT-YAMELL, JUDITH
 Name:
 YARNELL, JUDITH

 Address:
 11819 BLACKWOOD LANE
 Address:
 11819 BLACKWOOD LANE

 City-St-Zip:
 W. PALM BCH, FL 33412
 City-St-Zip:
 W. PALM BCH, FL 33412

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BRANNUM, KATHERINE H
 Name:

 Address:
 131 CATROCK LANE
 Address:

 City-St-Zip:
 JUPITER, FL 33458
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 FENNELL, KAREN
 Name:

 Address:
 13205 US HWY. ONE, SUITE 202
 Address:

 City-St-Zip:
 JUNO BCH, FL 33408
 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: JUDITH YARNELL PD 04/15/2009