2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N08000007317

Entity Name: JEWISH MONTESSORI OF TAMPA, INC.

Current Principal Place of Business:

2001 W SWANN AVE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

2001 W SWANN AVE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 26-3122441 **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:

HUNEYCUTT, DONNA
12501 TWISTED OAK DR.
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

RIVKIN, CHANA
8913 EASTMAN DR
TAMPA, FL 33626 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: CHANA RIVKIN 05/01/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: RIVKIN, CHANA
Address: 415 S. FREMONT AVE
City-St-Zip: TAMPA, FL 33606

Title: DIR ( ) Delete
Name: RIVKIN, DEVORAH
Address: 2001 W. SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: DIR ( ) Delete
Name: KLEIN, ELLEN
Address: 5055 CYPRESS TRACE DR.
City-St-Zip: TAMPA, FL 33624

Title: DIR ( ) Delete
Name: RIVKIN, DVORKI
Address: 5205 E131ST AVE.
City-St-Zip: TAMPA, FL 33617

Title: DIR ( ) Delete
Name: GOLD, APRIL
Address: 19104 AVE BAYONNES
City-St-Zip: LUTZ, FL 33558

Title: DIR ( ) Delete
Name: HUNEYCUTT, DONNA
Address: 12501 TWISTED OAK DR.
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: RIVKIN, CHANA
Address: 8913 EASTMAN DR.
City-St-Zip: TAMPA, FL 33626

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: ( ) 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: CHANA RIVKIN DIR 05/01/2009
Electronic Signature of Signing Officer or Director Date