

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10083

FILED
May 01, 2007
Secretary of State

Entity Name: SOUTH FLORIDA MONTESSORI EDUCATION CENTER, INC.

Current Principal Place of Business:

606 SO. PALM WAY
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

713 EAST ATLANTIC BLVD
POMPANO BEACH, FL 330606345

New Mailing Address:

606 S PALMWAY
LAKE WORTH, FL 33460

FEI Number: 59-2553586 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:

DELILLA, VICTORIA
606 S. PALM WAY
L
LAKE WORTH, FL US

Name and Address of New Registered Agent:

DELILLA, VICTORIA A PRES
606 S. PALM WAY
LAKE WORTH, FL 33460 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: VICTORIA A. DELILLA

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: THOMAS, DELILLA
Address: 315 ROOSEVELT AVE
City-St-Zip: FREEPORT, NY 11520

Title: DPS () Delete
Name: DE LILLA, VICTORIA,
Address: 606 S PALMWAY
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: WINANS, DAVID R III
Address: 606 S PALMWAY
City-St-Zip: LAKE WORTH, FL 33460

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:

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: VICTORIA A. DELILLA

PRES

05/01/2007

Electronic Signature of Signing Officer or Director

Date