

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22519

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** THE MAGNOLIA SCHOOL, INC.

**Current Principal Place of Business:**

2705 W. THARPE ST.  
TALLAHASSEE, FL 32303 US

**New Principal Place of Business:**

**Current Mailing Address:**

2705 W. THARPE ST.  
TALLAHASSEE, FL 32303 US

**New Mailing Address:**

**FEI Number:** 59-2841227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCGLYNN, KATHLEEN  
2705 W. THARPE  
TALLAHASSEE, FL 32303 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: YOUNG, JANET  
Address: 2830 BOATNER ST.  
City-St-Zip: TALLAHASSEE, FL 32310

Title: D  
Name: SMITH, SUSAN  
Address: 149 VIRGIL WAY  
City-St-Zip: QUINCY, FL 32351

Title: D  
Name: WILSON, JULIE  
Address: 902 KITTRELL RD.  
City-St-Zip: QUINCY, FL 32351

Title: D  
Name: WILEY, SUE  
Address: 1920 CHOWKEEBIN NENE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D  
Name: BREY, WILLIAM  
Address: 2646 NOBLE DR.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: DIAMOND, HEATHER  
Address: 2005 CHOWKEEBIN NENE  
City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: JANET YOUNG

D

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date