


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N30934</b> 1. Entity Name THE OAK SCHOOL OF DELRAY BEACH, INC.	
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Principal Place of Business 2515 N. SWINTON AVE DELRAY BEACH, FL 33444	Mailing Address 2515 N. SWINTON AVE DELRAY BEACH, FL 33444
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04032007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0144766	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  SCHLICHTING, NANCY R ESQ 8643 S 45TH STREET LAKE WORTH, FL 33467
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHLICHTING, NANCY R 8643 S 45TH ST LAKE WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MOUW, CATHERINE 1231 VISTA DEL MAR DR DELRAY BEACH, FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH, FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROMFH, ELIZABETH R 8643 S 45TH ST LAKE WORTH, FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROMFH, JULES 8643 S 45TH ST LAKE WORTH, FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000632354  
04/13/07-80050-006 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Elizabeth R. Romfh*

4/3/07 561-272-8415

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #