

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N49757 (0)**

1. Corporation Name

**GENESIS MIDDLE & HIGH SCHOOL, INC.**



Principal Place of Business

**7710 OSTEEN RD.  
NEW PORT RICHEY FL 34653  
US**

Mailing Address

**7710 OSTEEN RD.  
NEW PORT RICHEY FL 34653  
US**

3. Date Incorporated or Qualified  
**07/08/1992**

3a. Date of Last Report  
**01/27/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

**59-3138484**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NURRENBROCK, MELISSA  
7710 OSTEEN RD.  
NEW PORT RICHEY FL 34653**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE  
NAME **URBANSKI, RUTH**  
STREET ADDRESS **5407 DRIFT TIDE DR.**  
CITY-ST-ZIP **NEW PT. RICHEY FL**

TITLE **VD** ☒ DELETE  
NAME **SCANNAVINO, DOMINICK**  
STREET ADDRESS **4901 S. SHORE DR.**  
CITY-ST-ZIP **NEW PT. RICHEY FL**

TITLE **SD** ☐ DELETE  
NAME **ABBEY, CYNTHIA**  
STREET ADDRESS **6228 SPOONBILL DR.**  
CITY-ST-ZIP **NEW PORT RICHEY FL**

TITLE **TD** ☐ DELETE  
NAME **JONAS, ANDREW**  
STREET ADDRESS **4304 SEAGULL DR.**  
CITY-ST-ZIP **NEW PORT RICHEY FL**

TITLE **D** ☐ DELETE  
NAME **ACKLEY, EVA**  
STREET ADDRESS **5012 W. SHORE DR.**  
CITY-ST-ZIP **NEW PORT RICHEY FL**

TITLE **D** ☒ DELETE  
NAME **AMAR, RAMANA**  
STREET ADDRESS **5794 WEST SHORE DR.**  
CITY-ST-ZIP **NEW PORT RICHEY FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME **VD**  
2.3 STREET ADDRESS **Hudson, Leila**  
2.4 CITY-ST-ZIP **883 Royal Birkdale Drive  
Tarpon Springs, FL. 34689**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME **D**  
6.3 STREET ADDRESS **Hart, Larry**  
6.4 CITY-ST-ZIP **4415 Marine Parkway  
New Port Richey, FL. 34652**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Melissa A. Nurrenbrock*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*March 4, 1996* 813-846-8407  
Date Daytime Phone #

CR2E037 (12/95)