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Jan 27 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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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**

4. FEI Number

**59-3138484**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ 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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME **HUDSON, LEILA**  
STREET ADDRESS **883 ROYAL BIRKDALE DRIVE**  
CITY-ST-ZIP **TARPON SPRINGS FL**

TITLE VD ☒ DELETE

NAME **HUDSON, LEILA**  
STREET ADDRESS **883 ROYAL BIRKDALE DRIVE**  
CITY-ST-ZIP **TARPON SPRINGS FL**

TITLE SD ☒ DELETE

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

TITLE VD ☒ DELETE

NAME **RODDEY, CHRISTINA**  
STREET ADDRESS **1181 ANCLOTE ROAD #35**  
CITY-ST-ZIP **TARPON SPRINGS FL**

TITLE D ☐ DELETE

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

TITLE D ☒ DELETE

NAME **HART, LARRY**  
STREET ADDRESS **4415 MARINE PKWY**  
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 **Roddey, Christina**  
2.4 CITY-ST-ZIP **1181 Anclote Road # 35  
Tarpon Springs, FL. 34689**

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME **SD**  
3.3 STREET ADDRESS **Scala, Laurie**  
3.4 CITY-ST-ZIP **2716 St. Andrews Blvd  
Tarpon Springs, FL. 34689**

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME **TD**  
4.3 STREET ADDRESS **Clark, Mike**  
4.4 CITY-ST-ZIP **7535 Valencia Avenue  
Port Richey, FL.**

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 **Urbanski, Ruth**  
6.4 CITY-ST-ZIP **5407 Drift Tide Drive  
New Port Richey, FL. 34652**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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*

Melissa A. Nurrenbrock 1/14/98 813-846-8407

CR2E037 (10/97)