2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

7/16/2008-90010-041-$70.00-$70.00

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N92000000804

1. Entity Name
BREVARD COUNTY INDEPENDENT PRIVATE SCHOOL SYSTEM, INC.

Principal Place of Business	Mailing Address
988 WOODMERE PKWY. ROCKLEDGE, FL 32955	988 WOODMERE PKWY. ROCKLEDGE, FL 32955

07112008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
10361 EPIPHYTE RD Suite, Apt. #, etc.	SAME Suite, Apt. #, etc.
City & State: MIMS FL	City & State
Zip: 32754-6220 Country: VOLUSIA	Zip Country

4. FEI Number: 59-3068891 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GUTHRIE, DIANE S 25 MCLEOD ST PO BOX 541323 MERRITT ISLAND, FL 32953	Name: TINA L. MODERSON Street Address (P.O. Box Number is Not Acceptable): 10361 EPIPHYTE RD City: MIMS FL Zip Code: 32754-6220

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: TINA L MODERSON (Signature, type or printed name of registered agent and title if applicable) (Digital Registered Agent signature required when reinstating) DATE: 11JUL08

Filing Fee is $61.25
Due by September 12, 2008

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAHAM, HENRY F 988 WOODMERE PKWY. ROCKLEDGE, FL 32965	☒ Delete	D TINA L. MODERSON 10361 EPIPHYTE RD MIMS FL 32754-6220	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D GRAHAM, ELIZABETH B. 988 WOODSMERE PKWY ROCKLEDGE, FL 32955	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHAVEZ, DEBORAH 202 RIVER HEIGHTS DRIVE COCOA, FL 32922	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CURRY, CHRISTOPHER C 2096 OTTERBEIN AVENUE COCOA, FL 32922	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AMSTADT, DAVID 5941 CEDAR LAKE DRIVE COCOA, FL 32927	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: (Signature and typed or printed name of signing officer or director) 11JUL08 Date (407) 349-9743 Daytime Phone #

KS