

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Sep 10 1997 8:00am
Secretary of State

DOCUMENT # N93000002680 (7)

1. Corporation Name

THE GENEVA SCHOOL, INC.



Principal Place of Business
410 RIDGE ROAD
FERN PARK FL 32730
US

Mailing Address
410 RIDGE ROAD
FERN PARK FL 32730
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/10/1993	3a. Date of Last Report 01/24/1996
4. FEI Number 59-3195482	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

INGRAM, ROBERT
506 BURNT TREE LANE
SUITE 109
APOPKA FL 32712

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 *Robert Ingram* *Chairman - President* 9-3-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	INGRAM, MARJEAN	1.2 NAME	MIKE MALONE
STREET ADDRESS	506 BURNT TREE LANE	1.3 STREET ADDRESS	1715 KING ARTHUR'S CIRCLE
CITY-ST-ZIP	APOPKA FL	1.4 CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	PD ☐ DELETE	2.1 TITLE	D ☐ Change ☒ Addition
NAME	INGRAM, ROBERT	2.2 NAME	STUART, Crosland
STREET ADDRESS	506 BURNT TREE LANE	2.3 STREET ADDRESS	1323 Stewart Street
CITY-ST-ZIP	APOPKA FL	2.4 CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	D ☐ DELETE	3.1 TITLE	VD ☐ Change ☒ Addition
NAME	ALEXANDER, LAURA G	3.2 NAME	WALLACE, CHUCK
STREET ADDRESS	2700 MIDDLESEX RD	3.3 STREET ADDRESS	2353 Hunterfield Road
CITY-ST-ZIP	ORLANDO FL 32803	3.4 CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	D ☐ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	MALONE, BARBARA	4.2 NAME	MORSE, BECKY
STREET ADDRESS	1715 KING ARTHUR'S CIRCLE	4.3 STREET ADDRESS	2121 MOHAWK TRAIL
CITY-ST-ZIP	MAITLAND FL	4.4 CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	VD ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	SPROUL, R.C.	5.2 NAME	
STREET ADDRESS	2741 DEERBERRY COURT	5.3 STREET ADDRESS	
CITY-ST-ZIP	LONGWOOD FL	5.4 CITY-ST-ZIP	
TITLE	SD ☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	SPROUL, VESTA	6.2 NAME	
STREET ADDRESS	2741 DEER BERRY COURT	6.3 STREET ADDRESS	
CITY-ST-ZIP	LONGWOOD FL	6.4 CITY-ST-ZIP	

14. I do 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 *V. Sproul* *Required* 9/03/97 407 647.4774

CR2E037 (4/97)