2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000496

Entity Name: ALCOTT SCHOOL, INC.

Aug 11, 2004 Secretary of State

9908 LONE TREE LN 328 CREST AVENUE W TAMPA, FL 33618 TAMPA, FL 33603 US

Current Mailing Address: New Mailing Address:

328 CREST AVENUE W 9908 LONE TREE LN TAMPA, FL 33618 TAMPA, FL 33603 US

FEI Number: 59-3294333 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

URANOWSKI, MARY ANN 207 KINGSWAY RD. BRANDON, FL 33510

OFFICERS AND DIRECTORS:

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.

SIGNATURE:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SANDERS, KELISTA SANDERS, KELISTA Name: Name: Address: 9908 LONE TREE LANE Address: RR6 BOX 6395-B City-St-Zip: TAMPA, FL 33618 City-St-Zip: STROUDSBURG, PA 18360

Title: () Delete Title: (X) Change () Addition Name: PULLEN, DAVID Name: MARY ANN, URANOWSKI

Address: 802 ANNIE Address: 207 KINGSWAY ROAD City-St-Zip: TAMPA, FL 33612 City-St-Zip: BRANDON, FL 33510

Title: STD (X) Delete Title: () Change () Addition

SAND, SUSAN Name: Name: 12903 CINNIMON PLACE Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip:

Title: VD (X) Delete Title: () Change () Addition

DANGER, CHRISTINE A Name: Name: 1407 W. WOOD ST Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY ANN URANOWSKI D 08/11/2004