2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005325

FILED Apr 20, 2011 Secretary of State

Entity Name: OLIVET PRIVATE SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business:

568 SE PORT ST LUCIE BLVD PORT ST LUCIE, FL 34984 US

Current Mailing Address: New Mailing Address:

568 SE PORT ST LUCIE BLVD PORT ST LUCIE, FL 34984 US

FEI Number: 65-0641665 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:

MOURING, CATHIE 1542 SE COWNIE ST

PORT ST. LUCIE, FL 34983 US

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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: MOURING, CATHIE Address: 1542 SE COWNIE ST

City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: D

 Name:
 PUTNAM, HEATHER

 Address:
 2326 SW WOODRIDGE ST

 City-St-Zip:
 PORT ST LUCIE, FL 34953 US

Title: S

 Name:
 BURES, CHRISTINE

 Address:
 2417 SE WATERCREST ST

 City-St-Zip:
 PORT SAINT LUCIE, FL 34984 US

,

 Title:
 D

 Name:
 BALL, PRESTON

 Address:
 440 SW BUXTON AVE

City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: [

Name: PIAZZA, SUE Address: 2535 SE GOWIN DR

City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: [

Name: LYONS, ELLEN Address: 1893 OPEN VIEW DR

City-St-Zip: PORT SAINT LUCIE, FL 34953

I hereby 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 all other like empowered.

SIGNATURE: HEATHER PUTNAM D 04/20/2011