2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 26, 2004 8:00 am Secretary of State DOCUMENT # N96000004219 1.- Entity Name 04-26-2004 90435 035 ****70.00 THE APPLE SCHOOL, INC. Principal Place of Business Mailing Address 3425 NEW JERSEY ROAD LAKELAND FL 33803 3425 NEW JERSEY ROAD LAKELAND FL 33803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE : CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-3394736 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GITHENS ---Name -CITHERS, STEVE= Street: Address (P.O. Box Number is Not Acceptable). 1212 GEORGE JENKINS BLVD LAKELAND FL 33815 City Zip Code 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** (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change Addition O'SULLIVAN, RICHARD 3044W, YOUNM NAME NAME 1050 MARIPOSA AV 3229 STOWEWATER DR STREET ADDRESS STREET ADDRESS LAKELAND FL 33803 CITY-ST-7IP CITY-ST-ZIP Bartow, FL 33830 PRES ☐ Change TITLE ☐ Delete TITLE Addition GITHENS, STEVE KINKUAND, DEDN NAME NAME 1212 GEORGE JENKINS BLVD 617 HICKORY LN STREET ADDRESS STREET ADDRESS LAKELAND FL 33815 CITY-ST-ZIP CITY-ST-ZIE Lakeland. FL <u>3380 I</u> TITLE ☐ Delete TITLE Change Addition GITHENS, MITCHELL Lomo, Joseph NAME NAME 1902 3. FLORIDA AV 4320 BRAEMAR AVE STREET ADDRESS STREET ADDRESS LAKELAND FL 33813 CITY-ST-ZIP CITY - ST- ZIP Lakeland, FL 33803 ☐ Delete TITLE ☐ Change ☐ Addition GIBSON, CLYDE NAME 125 EAST MAIN ST STREET ADDRESS STREET ADDRESS BARTOW FL 33830 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete ☐ Change TITLE EANETT, ROBERT NAME NAME 1033 N PARKWAY FRONTAGE RD STREET ADDRESS STREET ADDRESS LAKELAND FL 33813 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TILE Addition HINDERITERRI HINDER, TERRI 225 E EDGEWOOD DR #58 NAME NAME 3913 WINDCHIME LANE STREET ADDRESS STREET ADDRESS LAKELAND FL 33811 Laxeland, FL 33803 CITY-ST-7IP CITY-ST-ZIP

12. 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 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 pequired by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 is

with all other like em

changed, or on an attachment with an address

SIGNATURE:

FILED