2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N97000000371

Entity Name: WESTMINSTER ACADEMY EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

5601 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5601 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0750530 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEACHAM, ROB
ONE FINANCIAL PLAZA
SUITE 2602
FORT LAUDERDALE, FL 33394 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: COCHRAN, CLARK
Address: 888 SE 3RD AVENUE, SUITE 301
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete
Name: MEACHAM, ROB
Address: ONE FINANCIAL PLAZA, SUITE 2602
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: D ( ) Delete
Name: BEAUPIED, GREGORY J
Address: 5601 NORTH FEDERAL HWY
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: MILLER, CLIFFORD
Address: 5601 NORTH FEDERAL HWY
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: BARNES, JAMES
Address: 6730 NE 21 DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FRANK G. MIEHLE DIR 04/30/2009

Electronic Signature of Signing Officer or Director — Date