

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000602

FILED
Jan 20, 2009
Secretary of State

Entity Name: THE ONE ROOM SCHOOL HOUSE PROJECT, INC.

Current Principal Place of Business:

4180 NE 15TH STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

4180 NE 15TH STREET
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3427156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERZIAN, SEVAN
2415 NW 38 CT
GAINESVILLE, FL 32605 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/P () Delete
Name: TERZIAN, SEVAN
Address: 2415 NW 38 CT
City-St-Zip: GAINESVILLE, FL 32605

Title: D/S () Delete
Name: VALANTIS, CHERYL
Address: 2322 NE 11 TERRACE
City-St-Zip: GAINESVILLE, FL 32609

Title: D/T () Delete
Name: NEWMAN, ARTHUR
Address: 1802 N.W. 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D/VP () Delete
Name: NEWMAN, ARTHUR
Address: 1802 N.W. 11TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: MCGRAW, MARK
Address: 3801 NW 9 PL
City-St-Zip: GAINESVILLE, FL 32605

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: BRETT BECKETT

DIRE

01/20/2009

Electronic Signature of Signing Officer or Director

Date