

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006828

FILED
Jan 18, 2008
Secretary of State

Entity Name: NEW DIMENSIONS HIGH SCHOOL, INC.

Current Principal Place of Business:

4900 OLD PLEASANT HILL ROAD
KISSIMMEE, FL 34759

New Principal Place of Business:

Current Mailing Address:

4900 OLD PLEASANT HILL ROAD
KISSIMMEE, FL 34759

New Mailing Address:

FEI Number: 59-3503922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAGRUDER, MICHAEL
203 S. CLYDE AVENUE
KISSIMMEE, FL 34741 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: GRIMM, JACQUELINE G
Address: 3515 BEAU CHENE DRIVE
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: CAFIERO, CHRISTINA D
Address: 4944 KEATON CREST DRIVE
City-St-Zip: ORLANDO, FL 32837 49

Title: D () Delete
Name: SHANSID-DEEN, LARRY
Address: 11615 WATERLILY
City-St-Zip: ORLANDO, FL 32837

Title: DP () Delete
Name: BUTLER, KAREN
Address: 2901 WILLOW OAK COURT
City-St-Zip: KISSIMMEE, FL 34744

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: DP (X) Change () Addition
Name: BUTLER-MILLER, KAREN
Address: 2901 WILLOW OAK COURT
City-St-Zip: KISSIMMEE, FL 34744

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: JACQUELINE G. GRIMM

D

01/18/2008

Electronic Signature of Signing Officer or Director

Date