

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006958

1. Entity Name

CRESTWELL HIGHER LEARNING PRIVATE SCHOOL, INC.

FILED

Jan 29, 2001 8:00 am  
Secretary of State

01-29-2001 90004 041 \*\*\*\*61.25

Principal Place of Business

8140 COLLEGE PARKWAY  
FORT MYERS FL 33919

Mailing Address

8140 COLLEGE PARKWAY  
FORT MYERS FL 33919

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0799880

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUTTERFIELD, CINDY  
8140 COLLEGE PARKWAY  
FORT MYERS FL 33919

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME BELLEW, JOHN  
STREET ADDRESS 5213 S W 10TH AVENUE  
CITY-ST-ZIP CAPE CORAL FL 33914

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP  
NAME ROMERO, CHRISTINE  
STREET ADDRESS 8140 COLLEGE PARKWAY  
CITY-ST-ZIP FORT MYERS FL 33919

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE T  
NAME HURLOCK, JEAN  
STREET ADDRESS 8140 COLLEGE PARKWAY  
CITY-ST-ZIP FORT MYERS FL 33919

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME BELLEW, MARCIA  
STREET ADDRESS 5213 S.W. 10TH AVENUE  
CITY-ST-ZIP CAPE CORAL FL 33914

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME KHEMKHAJON, NOPADOL  
STREET ADDRESS 769 VINCA WAY  
CITY-ST-ZIP SANIBEL FL 33957

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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 required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Cindy Butterfield*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REGISTERED AGENT

1-03-01

941-481-4509

Date

Daytime Phone #

CR2E037 (10/00)