

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000221

FILED
Jan 19, 2008
Secretary of State

Entity Name: NEW RAMAN RETI SCHOOL, INC.

Current Principal Place of Business:

17414 NW 112TH BOULEVARD
ALACHUA, FL 32615 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 937
ALACHUA, FL 32616 US

New Mailing Address:

FEI Number: 59-3493590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMIEUX, PIERRE
18024 NW 112TH BLVD
ALACHUA, FL 32615 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, S () Delete
Name: AGUILERA, DAVID
Address: 10103 NW 209TH LANE
City-St-Zip: ALACHUA, FL 32615 US

Title: D () Delete
Name: LESLIE, JONATHAN
Address: 13542 NW 137TH PLACE
City-St-Zip: ALACHUA, FL 32615 US

Title: D () Delete
Name: WILLIAM, BRIANT
Address: 14329 NW 186TH AVE.
City-St-Zip: ALACHUA, FL 32615 US

Title: D () Delete
Name: PATRICIA, PUGLIESE
Address: 7522 NW CR 236
City-St-Zip: ALACHUA, FL 32615 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BRIANT, WILLIAM
Address: 14329 NW 186TH AVE.
City-St-Zip: ALACHUA, FL 32615 US

Title: D (X) Change () Addition
Name: TASSINARE, MIRIAM
Address: 14405 NW 146TH AVE.
City-St-Zip: ALACHUA, FL 32615 US

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: DAVID AGUILERA

S

01/19/2008

Electronic Signature of Signing Officer or Director

Date