

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000262

FILED  
Mar 31, 2009  
Secretary of State

**Entity Name:** CORAL REEF MONTESSORI ACADEMY CHARTER SCHOOL, INC.

**Current Principal Place of Business:**

10853 S.W. 216 STREET  
MIAMI, FL 33170 US

**New Principal Place of Business:**

**Current Mailing Address:**

14651 SW 99 CT  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 65-0840179

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KING, JULIET  
14561 SW 99 CT  
MIAMI, FL 33176 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: PD ( ) Delete  
Name: HAMLER, ELSIE  
Address: 14651 SW 99 CT  
City-St-Zip: MIAMI, FL 33176

Title: SD ( ) Delete  
Name: GOLDEN, VICTOR  
Address: 14802 S.W. 139 PLACE  
City-St-Zip: MIAMI, FL 33189

Title: D ( ) Delete  
Name: FAUNTROY, RAY  
Address: 14540 JACKSON STREET  
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete  
Name: TORRES, NESTOR  
Address: 10853 SW 216 STREET  
City-St-Zip: MIAMI, FL 33170

Title: D ( ) Delete  
Name: CARR, WENDALL  
Address: 17900 SW 160 AVE  
City-St-Zip: MIAMI, FL 33187

Title: D ( ) Delete  
Name: TOWNSEND, GERALDINE  
Address: 24201 SW 120 AVENUE  
City-St-Zip: MIAMI, FL 33032

**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:

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: JULIET KING

RA

03/31/2009

Electronic Signature of Signing Officer or Director

Date