## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000490

Entity Name: SMART SCHOOL, INC.

FILED Apr 19, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3698 NW 15TH ST FORT LAUDERDALE, FL 33311 US **Current Mailing Address: New Mailing Address:** 3698 NW 15TH ST FORT LAUDERDALE, FL 33311 US FEI Number: 65-0808229 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER, EDWARD 10001 NW 60 PLACE PARKLAND, FL 33076 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MILLER, EDWARD Name: Name: 10001 NW 60TH PL Address: Address: City-St-Zip: PARKLAND, FL 33076 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: HOLMES, MARIAN Name: Address: 1757 NW 58 AVE Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: DD () Delete Title: () Change () Addition FORD, SHARON Name: Name: Address: 872 BANKS RD Address: City-St-Zip: COCONUT CREEK, FL 33063 City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: KOUTCHER, JAY Name: Address: 85721 NW 5TH ST Address: City-St-Zip: LAUDERHILL, FL 33351 City-St-Zip: Title: Title: () Delete () Change () Addition TEMPLETON, BLANCH Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: EDWARD MILLER AGEN 04/19/2004

10718 NW 49TH MANOR

CORAL SPRINGS, FL 33076

Address:

City-St-Zip: