

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003270

FILED
Feb 19, 2009
Secretary of State

Entity Name: INTERNATIONAL COMMUNITY SCHOOLS, INC.

Current Principal Place of Business:

1021 N. NEW YORK AVE., ROOM 200
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 952495
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 59-3525955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTOPHER, DONALD E
390 NORTH ORANGE AVE., STE. 220
ORLANDO, FL 32801 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: CD () Delete
Name: HORVATH, THOMAS
Address: 1885 BERKELEY COURT
City-St-Zip: MAITLAND, FL 32751

Title: VCD () Delete
Name: GIBSON, JAMES
Address: 1845 WILTON AVE
City-St-Zip: ORLANDO, FL 32805

Title: TD () Delete
Name: MILLS, MARK
Address: 1851 MERLOT DR
City-St-Zip: SANFORD, FL 32771

Title: SD () Delete
Name: KUHN, SUZANNE
Address: 144 TUSCA TRAIL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: BURKETT, NATALIE
Address: 1804 MAPLE LEAF DR
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: ALDERMAN, TERRI
Address: 100 ALBRIGHTON DR
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: GRITTER, JACK
Address: 101 CASPIAN COVE
City-St-Zip: SANFORD, FL 32773

Title: VCD (X) Change () Addition
Name: KUHN, SUZANNE
Address: 1404 TUSCA TRAIL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD (X) Change () Addition
Name: BLACK, CHRISTENA
Address: 11158 CRESCENT BAY BLVD
City-St-Zip: CLERMONT, FL 34711

Title: SD (X) Change () Addition
Name: BURKETT, NATALIE
Address: 1804 MAPLE LEAF DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: MILLS, MARK
Address: 925 SWEETGUM VALLEY PL.
City-St-Zip: LAKE MARY, FL 32746

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: TERRI ALDERMAN

D

02/19/2009

Electronic Signature of Signing Officer or Director

Date