

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007375

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: EINSTEIN MONTESSORI SCHOOL, INC.

## Current Principal Place of Business:

5930 S W ARCHER ROAD  
GAINESVILLE, FL 32608 US

## New Principal Place of Business:

5910 S W ARCHER ROAD  
GAINESVILLE, FL 32608 US

## Current Mailing Address:

5930 S W ARCHER ROAD  
GAINESVILLE, FL 32608 US

## New Mailing Address:

5910 S W ARCHER ROAD  
GAINESVILLE, FL 32608 US

FEI Number: 59-3552344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

OSBRACH, ALLEN Z  
1255 FAULKINGHAM ROAD  
MERRITT ISLAND, FL 32952 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: P ( ) Delete  
Name: CONWAY, TIMOTHY W DR.  
Address: 1826 SW 81ST TERRACE  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D ( ) Delete  
Name: ABRUZZINO, MARY BETH  
Address: 303 SE WENONA AVENUE  
City-St-Zip: OCALA, FL 34471

Title: S ( ) Delete  
Name: MCGLONE, KATHLEEN  
Address: 3930 SE 14TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: VP ( ) Delete  
Name: LOMBARDINO, LINDA DR.  
Address: 560 NE 7 AVENUE  
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete  
Name: SUMMERS, WILLIAM S  
Address: 25407 SW 18TH AVE  
City-St-Zip: MICANOPY, FL 32667

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: MAYO, JOSEPH  
Address: 1016 NW 94TH STREET  
City-St-Zip: GAINESVILLE, FL 32606 US

Title: T (X) Change ( ) Addition  
Name: MICHEL, LISA M  
Address: 17314 SW 103RD PLACE  
City-St-Zip: ARCHER, FL 32618 US

Title: VP (X) Change ( ) Addition  
Name: LOMBARDINO, LINDA DR.  
Address: 560 NE 7 AVENUE  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: S (X) Change ( ) Addition  
Name: RYAN, MARSHEEN  
Address: 772 S CR 21  
City-St-Zip: HAWTHORNE, FL 32640 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: LISA M. MICHEL

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date