2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N9900006524

1. Entity Name

GENESIS PREPARATORY SCHOOL OF GAINESVILLE, INC.

						OD WE 15					
Principal Pla	ace of Busines:	3	Mailin	g Address		-	1				
			7 NW 23RD AVENUE								
				AINESVILLE FL 32609			1				
US			US				ĺ				
•							1 18 2 1/18 / 618		11 16 111 13 11 1 3 111		
2. Principal	Place of Busin	ess	3. Mai	ling Address	·····		-				
,					. 14051101 010		H ABINI BUNIA BINA	E ENLE III	ULI UIUI KUUI		
Suite, Ap	t. #. etc.		Su	ite, Apt. #, etc.			<u> </u>	-			
			"				-	CHECK HERE IF	MAKING CHA	ANGES	
City & State		Cit	City & State			4. FEI Number 59-3633481			Ιlλr	oplied For	
•				,			4. (C) Nomber (59-3633481		-	ot Applicable
Zip	· · · · · · · · · · · · · · · · · · ·	Country	Zip)	Country		 		60.		· · ·
·			-		oody		5. Certificate of	Status Desired	Fee I	75 Add Require	ditional d
	6. Name	and Address of Current	t Registere	ed Agent			7. Name and A	dress of New Reg			
					Na	me	1. Name and A	actess of New neg	istered Agen		
EANA/ALI	DETED C K						ll. Pete	r C.K.			
ENWALL, PETER C.K. 2790 N.W. 43RD STREET, SUITE 200				Enwa Street Address (P.O. Box Number is	Not Acceptable)			
					<u> </u>	926_	N.W. 13t	h Street			
GAINES!	VILLE FL 326	Ub									
					City	y				Zip Code	e
						Gain	esville		_ FL ^	3260	וו וו
8. The above	e named entity	submits this statement for	or the purp	ose of changing its	registered offi	ce or registere	ed agent, or both, i	in the State of Florid	a. I am familia	ar with,	and accept
the obliga	ations of registe	ered agent.									
SIGNATURE											
_	Signature, typed o	or printed name of registered agent	t and title if appl	licable. (NOTE	: Registered Agent	signature required	when reinstating)		DATE		
4.											
			I								ī
	FILE NOW:	EEE 10 661 25		9. Election Carr	paign Financi	ing	\$5 00 May Bo	Make	Check Pay	vable :	to
	FILE NOW:	FEE IS \$61.25		9. Election Cam Trust Fund C	, -	ing	\$5.00 May Be Added to Fees	Make Florida	Check Pay Departmen	yable a	to State
3	FILE NOW:	FEE IS \$61.25			, -	~ <u> </u>		Make Florida	Check Pay Departmer	yable nt of S	to State
	FILE NOW:	FEE IS \$61.25	RECTORS		, -	<u> </u>	Added to Fees	Make Florida GES TO OFFICERS	Departmer	nt of S	State
3	D	OFFICERS AND DI	RECTORS	Trust Fund C	ontribution.		Added to Fees	Florida	Departmer	ORS IN	State 10
3		OFFICERS AND DI	RECTORS		ontribution.	A	Added to Fees	Florida GES TO OFFICERS	Departmer	nt of S	State
3 10. TITLE	D BOST, COY	OFFICERS AND DI	RECTORS	Trust Fund C	11.	D McC1	Added to Fees ADDITIONS/CHANGE Lain, Gar	Florida GES TO OFFICERS TY A.	Departmer	ORS IN	State 10
10. TITLE NAME	D BOST, COV	OFFICERS AND DI	RECTORS	Trust Fund C	11. TITLE NAME	D McCl	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmer	ORS IN	State 10
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOST, COV	OFFICERS AND DI	RECTORS	Trust Fund C	TITLE NAME STREET ADDR	D McCl	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A.	Departmen	ORS IN	10 Odition
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BOST, COY P O BOX 1 GAINESVILI	OFFICERS AND DI R 3806 LE FL 32601	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP	D McCl	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN	State 10
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BOST, COY P O BOX 1 GAINESVILI D DAVIS, JEA	OFFICERS AND DI 7 R 3806 LE FL 32601 NNE	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	D McCl	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN	10 Odition
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6	OFFICERS AND DI R 3806 LE FL 32601 NNE TH AVE	RECTORS	Trust Fund C	TITLE NAME STREET ADDR TITLE NAME STREET ADDR TITLE NAME STREET ADDR	D McCl 1360 Gain	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN	10 Odition
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI	OFFICERS AND DI 7 R 3806 LE FL 32601 NNE	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP	D McCl 1360 Gain	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN Change	10 ddition
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D	OFFICERS AND DI 7 R 3806 LE FL 32601 NNE TH AVE LE FL 32601	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	D McCl 1360 Gain	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN	10 Odition
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID	OFFICERS AND DI R 3806 E FL 32601 NNE TH AVE E FL 32601	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN Change	10 ddition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201	OFFICERS AND DI / R 3806 LE FL 32601 NNE TH AVE LE FL 32601 A TH ST.	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN Change	10 ddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI	OFFICERS AND DI R 3806 E FL 32601 NNE TH AVE E FL 32601	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN Change	10 ddition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D	OFFICERS AND DI / R 3806 LE FL 32601 NNE TH AVE LE FL 32601 A TH ST. LE FL 32601	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmer	ORS IN Change	10 ddition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE	OFFICERS AND DI / R 3806 LE FL 32601 NNE TH AVE LE FL 32601 A TH ST. LE FL 32601 RESA	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmer	ORS IN Change Change Change	10 doition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31	OFFICERS AND DI (R 3806 LE FL 32601 NNE TH AVE LE FL 32601 A TH ST. LE FL 32601 RESA ST AVE	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmer	ORS IN Change Change Change	10 doition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI	OFFICERS AND DI / R 3806 LE FL 32601 NNE TH AVE LE FL 32601 A TH ST. LE FL 32601 RESA	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmer	ORS IN Change Change Change	10 doition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI D	OFFICERS AND DI / R 3806 _E FL 32601 NNE TH AVE _E FL 32601 A TH STE FL 32601 RESA ST AVE _E FL 32609	RECTORS	Trust Fund Co	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Department AND DIRECTION CO.	ORS IN Change Change Change	10
3 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI	OFFICERS AND DI / R 3806 _E FL 32601 NNE TH AVE _E FL 32601 A TH STE FL 32601 RESA ST AVE _E FL 32609	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Department AND DIRECTION CO.	ORS IN Change Change Change	10 doition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI D	OFFICERS AND DI / R 3806 _E FL 32601 NNE TH AVE _E FL 32601 A TH STE FL 32601 RESA ST AVE _E FL 32609 ARMAINE	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDRI CITY-ST-ZIP TITLE	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Department AND DIRECTION CO.	ORS IN Change Change Change	10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI D HENRY, CH 2336 NE 3F	OFFICERS AND DI / R 3806 _E FL 32601 NNE TH AVE _E FL 32601 A TH STE FL 32601 RESA ST AVE _E FL 32609 ARMAINE RD PL	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Department AND DIRECTION CO.	ORS IN Change Change Change	10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI D HENRY, CH	OFFICERS AND DI / R 3806 _E FL 32601 NNE TH AVE _E FL 32601 A TH STE FL 32601 RESA ST AVE _E FL 32609 ARMAINE RD PL	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDRI CITY-ST-ZIP	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Departmen	ORS IN Change Change Change Change	10 Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D BOST, CON P O BOX 1 GAINESVILI D DAVIS, JEA 1812 NW 6 GAINESVILI D MOORE, ID 505 NE 201 GAINESVILI D OSOBA, TE 1359 NE 31 GAINESVILI D HENRY, CH 2336 NE 3F	OFFICERS AND DI / R 3806 _E FL 32601 NNE TH AVE _E FL 32601 A TH STE FL 32601 RESA ST AVE _E FL 32609 ARMAINE RD PL	RECTORS	Trust Fund C	TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR	D McCl 1360 Gair	Added to Fees ADDITIONS/CHAN Lain, Gar 2 N.W. 1	Florida GES TO OFFICERS TY A. 3th Avenue	Department AND DIRECTION CO.	ORS IN Change Change Change Change	10

02-07-2003 90101 004 ****70.00

rillu
Feb 07, 2003 8:00 am
Secretary of State

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP