

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108102

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: MONTESSORI PREPARATORY OF BELLEAIR, INC.

**Current Principal Place of Business:**

557 CLEARWATER/LARGO RD  
LARGO, FL 33770

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8425  
SEMINOLE, FL 33775

**New Mailing Address:**

FEI Number: 59-3683173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

D'SOUZA, SHAMA  
3450 83RD ST. NORTH  
ST. PETERSBURG, FL 33710 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: D'SOUZA, GERARD  
Address: 3450 83RD ST. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D ( ) Delete  
Name: D'SOUZA, SHAMA  
Address: 3450 83RD ST. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAMA D'SOUZA

VP

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date