

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097571

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: EXTREME SCHOOL, INC.

## Current Principal Place of Business:

243 POTTER ROAD  
WEST PALM BEACH, FL 33405 US

## New Principal Place of Business:

234 EDGEWOOD DRIVE  
WEST PALM BEACH, FL 33405 US

## Current Mailing Address:

243 POTTER ROAD  
WEST PALM BEACH, FL 33405 US

## New Mailing Address:

234 EDGEWOOD DRIVE  
WEST PALM BEACH, FL 33405 US

FEI Number: 32-0030787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD ( ) Delete  
Name: SCHAEER, MAE ETTA  
Address: 243 POTTER ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: STD ( ) Delete  
Name: SCHAEER, MARY  
Address: 243 POTTER ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SCHAEER, MAE ETTA  
Address: 234 EDGEWOOD DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: STD (X) Change ( ) Addition  
Name: SCHAEER, MARY  
Address: 234 EDGEWOOD DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33405

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: MAE ETTA SCHAEER

PD

03/13/2007

Electronic Signature of Signing Officer or Director

Date