


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000021525 1. Entity Name OPEN CORRIDOR SCHOOLS, INC.	
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Principal Place of Business 212 LAKEWOOD DRIVE BRADENTON, FL 34210 US	Mailing Address 212 LAKEWOOD DRIVE BRADENTON, FL 34210 US
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02242005 No Chg-P CR2E034 (10/03)

4. FEI Number 51-0445910	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

DRISCOLL, CONSTANCE F
212 LAKEWOOD DRIVE
BRADENTON, FL 34210

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS DRISCOLL, CONTANCE F 212 LAKEWOOD DRIVE BRADENTON, FL 34210
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRISCOLL, MARIBETH 212 LAKEWOOD DRIVE BRADENTON, FL 34210
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRISCOLL, FRANCES 212 LAKEWOOD DR BRADENTON, FL 34210
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THRELKELD, MARTHA 212 LAKEWOOD DRIVE BRADENTON, FL 34210
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WADE, SARA 212 LAKEWOOD DRIVE BRADENTON, FL 34210
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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03/07/05-80008-024 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

33-05 (941) 752-8087