


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000096834**  
 1. Entity Name  
**WALSINGHAM WEE SCHOOL, INCORPORATED**



Principal Place of Business      Mailing Address  
**11775 WALSINGHAM ROAD**      **11337 124TH TERRACE N**  
**LARGO, FL 33778 US**      **LARGO, FL 33778 US**

**DO NOT WRITE IN THIS SPACE**



03152006      No Chg-P      CR2E034 (11/05)  
 4. FEI Number      Applied For  
**20-1292773**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent  
**ANGELLO, JANICE G**  
**11337 124TH TERRACE N**  
**LARGO, FL 33778**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering)  
Signature, typed or printed name of registered agent and title if applicable.      DATE

**FILE NOW!!! FEE IS \$150.00**      9. Election Campaign Financing      **\$5.00 May Be**  
**After May 1, 2006 Fee will be \$550.00**      Trust Fund Contribution.       **Added to Fees**      04/27/06-80053-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ANGELLO, JANICE G
STREET ADDRESS	11337 124TH TERRACE N
CITY-ST-ZIP	LARGO, FL 33778
TITLE	D
NAME	ANGELLO, CHRISTINA M
STREET ADDRESS	11337 124TH TERRACE N
CITY-ST-ZIP	LARGO, FL 33778
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janice G. Angello      Date: 4/12/06      Daytime Phone #: (727) 586-6437