

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000110052

FILED
Feb 28, 2011
Secretary of State

Entity Name: THE CENTER FOR GUIDED MONTESSORI STUDIES, INC.

Current Principal Place of Business:

9650 STICKLAND ROAD
SUITE 103-127
RALEIGH, NC 27613

New Principal Place of Business:

Current Mailing Address:

9650 STICKLAND ROAD
SUITE 103-127
RALEIGH, NC 27613

New Mailing Address:

FEI Number: 26-4002392 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SELDIN, TIM
19600 STATE ROAD 64 EAST
BRADENTON, FL 34212 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

OFFICERS AND DIRECTORS:

Title: P
Name: SELDIN, MARC G
Address: 6821 COOL POND ROAD
City-St-Zip: RALEIGH, NC 27613

Title: D
Name: SELDIN, TIM
Address: 19600 E STATE ROAD 64
City-St-Zip: BRADENTON, FL 34212

Title: D
Name: WOLFF, JONATHAN
Address: 1242 RUE STREET MORITZ LAKE
City-St-Zip: SAN MARCOS, CA 92078

Title: D
Name: BRAVO, KITTY
Address: 461 NE 791 ST.
City-St-Zip: OLD TOWN, FL 32680

I hereby 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 all other like empowered.

SIGNATURE: MARC G. SELDIN

PRES

02/28/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date