

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000045961

FILED
Apr 27, 2010
Secretary of State

Entity Name: THE CHALLENGER SCHOOL (MONTESORI) INC.,

Current Principal Place of Business:

12128 NW 2ND AVENUE
NORTH MIAMI, FL 33168 US

New Principal Place of Business:

Current Mailing Address:

12128 NW 2ND AVENUE
NORTH MIAMI, FL 33168 US

New Mailing Address:

FEI Number: 26-1626481 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HILTON, BEVERLY
12128 NW 2ND AVENUE
N. MIAMI, FL 33168 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: P
Name: ADDISON, RAYMOND
Address: 12495 NW 6TH AVENUE
City-St-Zip: N. MIAMI, FL 33168 US

Title: VP
Name: HILTON, BEVERLY
Address: 12495 NW 6TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33168 US

Title: S
Name: FRANCK, JOELLE
Address: 181 NW 110TH STREET
City-St-Zip: MIAMI SHORES, FL 33168 US

Title: D
Name: SCOTT, PHILLIP
Address: 12495 NW 6TH AVENUE
City-St-Zip: N. MIAMI, FL 33168 US

Title: T
Name: MASUYAMA, BARBARA
Address: 14030 BISCAYNE BLVD., APT. 1002
City-St-Zip: N. MIAMI, FL 33181 US

Title: D
Name: BAILEY, RUBY
Address: 2458 CARPENTER STREET
City-St-Zip: PORT SAINT LUCIE, FL 34984

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: BEVERLY HILTON

VP

04/27/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date