FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 , ' PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary-of State 1996 DIVISION OF CORPORATIONS P94000081446 (4) DOCUMENT # Corporation Name OXFORD PRE-SCHOOL ACADEMY, INC. Principal Place of Business Mailing Address 3400 S TAMIAMI TRAIL 1503 57TH AVE WEST **BRADENTON FL 34207** SARASOTA FL 34239 3. Date Incorporated or Qualified 3a. Date of Last Report 11/07/1994 04/27/1995 APPLIED FOR 2. Principal Place of Business 11 1503 51 AV€ 2a. Mailing Address 4. FLI Number Applied For 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FLORIDA BLADENTON \Box 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, U.S. A. 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CLARK, KATHRYN Street Address (P.O. Box Number is Not Acceptable) 82 1503 57TH AVE WEST 83 **BRADENTON FL 34207** 84 City 85 Zin Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Florida Statutes SIGNATURE DATE Signature, typed or printed have oblingestero Lagratia, 1 litteril applicat, o 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12/2 PSD DELETE TITLE 1 1 THILE ☐ Change Addit on CLARK, JOHN T NAME 1.2 NAME CR2E034 1503 57TH AVE W STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL** CITY - ST - ZIP 14 CHY-ST-ZIP TITLE VTD ☐ DELETE 2.1 Bit 6 ☐ Change Addition CLARK, KATHRYN NAME 2.2 NAME 1503 57TH AVE W STREET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP 2.4 CITY - ST - ZIP □ DELETE TITLE 3 1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4 1]| LF Charge Addition NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4.0(TY-ST-Z)P CITY-ST-7/P DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7/P 5.4 C TY+ST ZIP DELETE ☐ Char.o TITLE 6.1 TITLE Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CrTy - ST - ZrP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental annual 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

VICE PRESIDENT

941-756-4659

appears in Block 12 or Block 13 if changed

SIGNATURE:

on an attachment with an address