2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000032112

Address:

City-St-Zip:

2135 MALIBU LAKES CIRCLE

NAPLES, FL 34119 US

Entity Name: CHILDREN'S MONTESSORI SCHOOL INC.

FILED Mar 24, 2009 Secretary of State

y	iner official	KEIVO MOIVI EGGOIN GOINGGE	_, , ,, ,,				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
2535 NOR NAPLES, I		PLAZA DRIVE					
Current Mailing Address:			New Maili	New Mailing Address:			
2535 NOR NAPLES, I		PLAZA DRIVE					
FEI Number	: 65-0823739	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
TAYLOR, 6111 HIDE NAPLES, I	DEN OAKS L	N US					
	named entit e of Florida.	y submits this statement for the	purpose of changing i	ts registere	d office or registered agent, or b	oth,	
SIGNATU	RE:						
	Electr	onic Signature of Registered Ac	gent		Date		
Election Car	mpaign Financ	ing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PT TAYLOR, TR 6111 HIDDEI NAPLES, FL	N OAKS LN	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	V TAYLOR, MA 6111 HIDDEI NAPLES, FL	N OAKS LN	Title: Name: Address: City-St-Zip:	V TAYLOR, A 6111 HIDDI NAPLES, F	EN OAKS LN		
Title: Name:	S HEISLER. MI	()Delete ELISSA R	Title: Name:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: TRACY L. TAYLOR P/T 03/24/2009