

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763899

**FILED**  
**Feb 11, 2020**  
**Secretary of State**  
**3728351343CC****Entity Name:** THE MONTESSORI LEARNING CENTER OF FORT WALTON BEACH, INC.**Current Principal Place of Business:**28 MIRACLE STRIP PKWY SW, SUITE 2  
FT. WALTON BEACH, FL 32548**Current Mailing Address:**28 MIRACLE STRIP PKWY SW, SUITE 2  
FT. WALTON BEACH, FL 32548**FEI Number: 59-2210929****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**IZER, STACEY  
340 SHANNON COURT  
FORT WALTON BEACH, FL 32548 US*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: STACEY IZER****02/11/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title OTHER  
Name SMITH, MCKENZIE  
Address 911 SARA DRIVE  
City-State-Zip: SHALIMAR FL 32579Title PRESIDENT  
Name WILEY, AMANDA  
Address 2 POINT COMFORT CT  
City-State-Zip: MARY ESTHER FL 32569Title DIRECTOR  
Name IZER, STACEY  
Address 322 IVA PLACE SW  
City-State-Zip: FORT WALTON BEACH FL 32548Title VP  
Name COTTON, MARY CATHERINE  
Address 1106 BEACHVIEW DRIVE  
City-State-Zip: FORT WALTON BEACH FL 32547Title OTHER  
Name SIMPSON, COURTNEY  
Address 19 BAYSHORE DRIVE  
City-State-Zip: SHALIMAR FL 32579Title OTHER  
Name TINSLEY, KENT  
Address 8 BAY COVE DRIVE  
City-State-Zip: SHALIMAR FL 32579Title OTHER  
Name ARROWSMITH, STEPHEN  
Address 250 LAFITTE CRESCENT  
City-State-Zip: FORT WALTON BEACH FL 32548Title OTHER  
Name GOODWIN, KRYSTLE  
Address 402 VALERIA STREET  
City-State-Zip: FORT WALTON BEACH FL 32547**Continues on page 2**

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STACEY IZER****DIRECTOR****02/11/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	TREASURER
Name	DONEGAN, BETHANY
Address	121 WAYNELL CIRCLE
City-State-Zip:	FORT WALTON BEACH FL 32548