

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763899

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:**HELTON, ANN MARIE
3899 GULF MIST COURT
DESTIN, FL 32541 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:** ANN M. HELTON

01/25/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	OTHER
Name	IZER, STACEY
Address	340 SHANNON COURT
City-State-Zip:	FORT WALTON BEACH FL 32548

Title	PRESIDENT
Name	SIMPSON, COURTNEY
Address	19 BAY SHORE DR
City-State-Zip:	SHALIMAR FL 32579

Title	TREASURER
Name	BELMAIN, EMMA
Address	360 KEPNER
City-State-Zip:	FORT WALTON BEACH FL 32548

Title	VP
Name	SMITH, SUSAN MORGAN
Address	359 KEPNER DR
City-State-Zip:	FORT WALTON BEACH FL 32548-4137

Title	DIRECTOR
Name	HELTON, ANN
Address	3899 GULF MIST CT
City-State-Zip:	DESTIN FL 32541

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: ANN M. HELTON**DIRECTOR**

01/25/2024

Electronic Signature of Signing Officer/Director Detail

Date