2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2018
Secretary of State
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Entity Name: CHILDREN'S HOUSE ACADEMIC MONTESSORI PROGRAM INC.

Current Principal Place of Business:

55 N. WASHINGTON STREET
ORMOND BEACH, FL 32174

Current Mailing Address:

55 N. WASHINGTON STREET
ORMOND BEACH, FL 32174

FEI Number: 90-0449628

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SONYA L. LANEY C.P.A., P.A.
5131 S. RIDGEWOOD AVENUE
SUITE F
PORT ORANGE, FL 32127 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: SONYA L. LANEY 03/01/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	V
Name	BAKER, MARK	Name	MINENNA, ANDY
Address	327 GROOVER CREEK CROSSING	Address	14 CLYDESDALE DRIVE
City-State-Zip:	ORMOND BEACH FL 32174	City-State-Zip:	ORMOND BEACH FL 32174

Title	T
Name	DUNN, FRAN
Address	935 WILLOW RUN
City-State-Zip:	ORMOND BEACH FL 32174

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: FRAN DUNN TREASURER 03/01/2018

Electronic Signature of Signing Officer/Director Detail — Date