

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000928

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

01/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BAKER, MARK
Address 327 GROOVER CREEK CROSSING
City-State-Zip: ORMOND BEACH FL 32174

Title V
Name MINENNA, ANDY
Address 14 CLYDESDALE DRIVE
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

01/21/2020

Electronic Signature of Signing Officer/Director Detail

Date