

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

DOCUMENT# N18000008048

**Jan 08, 2024**

**Entity Name:** MI ESCUELA MONTESSORI, INC.

**Secretary of State**

**3680971447CC**

**Current Principal Place of Business:**

6129 US HIGHWAY 98 S  
LAKELAND, FL 33812

**Current Mailing Address:**

6129 US HIGHWAY 98 S  
LAKELAND, FL 33812 US

**FEI Number: 83-2946978**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

DE LA CRUZ, KELLY  
6129 US HIGHWAY 98 S  
LAKELAND, FL 33812 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MEDINA, DANIEL  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            DIRECTOR  
Name            LAWSON, LYNDIA  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            DIRECTOR  
Name            SIERRA, JONATHAN  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            TREASURER  
Name            MARMOL, MARTIN  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            VP  
Name            DRAKE NELSON, CATHLEEN  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            DIRECTOR  
Name            ALBRITTON, LORI  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            DIRECTOR  
Name            BENTLEY, JOYCE  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title            SECRETARY  
Name            BIZERRA, SUE  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

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*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: KELLY DE LA CRUZ**

**EXECUTIVE DIRECTOR**

**01/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           SELLERS, HAZEL  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812

Title           CEO  
Name           DE LA CRUZ, KELLY  
Address        6129 US HIGHWAY 98 S  
City-State-Zip: LAKELAND FL 33812