

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714203

**Entity Name:** CHILDREN'S EDUCATIONAL SERVICES, INC.

**Current Principal Place of Business:**

90 FORT WADE RD  
SUITE 115  
PONTE VEDRA, FL 32081

**Current Mailing Address:**

90 FORT WADE RD  
SUITE 115  
PONTE VEDRA, FL 32081 US

**FEI Number: 59-1216794**

**Certificate of Status Desired: No**

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

BROACH, LARRY K  
90 FORT WADE RD  
SUITE 115  
PONTE VEDRA, FL 32081 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: LARRY K BROACH**

**01/26/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, VP, SECRETARY  
Name BROACH, TINA L  
Address 90 FORT WADE RD  
SUITE 115  
City-State-Zip: PONTE VEDRA FL 32081

Title DIRECTOR, CHAIRMAN, CEO  
Name BROACH, LARRY K  
Address 90 FORT WADE RD  
SUITE 115  
City-State-Zip: PONTE VEDRA FL 32081

Title DIRECTOR, PRESIDENT  
Name WEAD, RICH JOSEPH  
Address 90 FORT WADE RD  
SUITE 115  
City-State-Zip: PONTE VEDRA FL 32081

Title DIRECTOR, VP  
Name UPRICHARD, ANDY STEPHEN  
Address 90 FORT WADE RD  
SUITE 115  
City-State-Zip: PONTE VEDRA FL 32081

Title DIRECTOR, VP  
Name BLANCO, ALVARO  
Address 90 FORT WADE RD  
SUITE 115  
City-State-Zip: PONTE VEDRA FL 32081

*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: RICH WEAD**

**PRESIDENT**

**01/26/2022**

Electronic Signature of Signing Officer/Director Detail

Date