


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 14, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # N03000008983**  
 1. Entity Name  
**INLET GROVE COMMUNITY HIGH SCHOOL, INC.**



Principal Place of Business: **7071 GARDEN ROAD RIVIERA BEACH, FL 33404**  
 Mailing Address: **7071 GARDEN ROAD RIVIERA BEACH, FL 33404**

**DO NOT WRITE IN THIS SPACE**



02032005 No Chg-NP CR2E037 (10/03)

4. FEI Number **20-0350216** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**MURGIO, MICHAEL J**  
**7071 GARDEN ROAD**  
**RIVIERA BEACH, FL 33404**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	BUCKINGHAM, MARK H
STREET ADDRESS	7071 GARDEN ROAD
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	VD
NAME	BURPHY, JAMES V
STREET ADDRESS	7071 GARDEN ROAD
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	SD
NAME	ANDERSON, RUTH
STREET ADDRESS	7071 GARDEN ROAD
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	TD
NAME	CARISEO, LOURDES
STREET ADDRESS	7071 GARDEN ROAD
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	D
NAME	BAKER-BARNES, ROSALYN SIA
STREET ADDRESS	7071 GARDEN ROAD
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 02/15/2005-80022-013 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael J Murgio* **2/4/05** **685-2665**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #