2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 768162

Entity Name: THE VANGUARD SCHOOL OF LAKE WALES, FLORIDA, INC.

FILED
Jul 20, 2020
Secretary of State
4465330826CC

Current Principal Place of Business:

22000 HWY 27

LAKE WALES. FL 33859

Current Mailing Address:

22000 HWY 27

LAKE WALES, FL 33859 US

FEI Number: 59-2298398 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRAVES, SHANNON 22000 HWY 27 LAKE WALES, FL 33859 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: SHANNON GRAVES 07/20/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

 Title
 TREASURER
 Title
 DIRECTOR

 Name
 STORY, VICTOR
 Name
 SALUD, VIOLETA

 Address
 22000 HWY 27
 Address
 22000 HWY 27

City-State-Zip: LAKE WALES FL 33859 City-State-Zip: LAKE WALES FL 33859

TitlePRESIDENTTitleDIRECTORNameGRAVES, SHANNONNameKAY, HOWARDAddressTHE VANGUARD SCHOOLAddress22000 HWY 27

22000 HWY 27

City-State-Zip: LAKE WALES FL 33859

Title CHAIRMAN
Title DIRECTOR

Name MURPHY, FREDERICK ESQUIRE

Name PHILLIPS, PETER

Address 22000 HWY 27

Address 22000 HWY 27 City-State-Zip: LAKE WALES FL 33859

City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR

Title DIRECTOR Name ANDREWS, GEORGE II

Name ARMSTRONG, LYNN SHELTON

Address P.O.BOX 247
Address 22000 HWY 27

City-State-Zip: HOBE SOUND FL 33475
City-State-Zip: LAKE WALES FL 33859

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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: SHANNON GRAVES PRESIDENT 07/20/2020

Electronic Signature of Signing Officer/Director Detail

Date

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name GEEHR, LILI

Address 22 EAST NEW LENOX ROAD

City-State-Zip: PITTSFIELD MA 01210

Title DIRECTOR

Name BALDWIN, CHARLES

Address 22000 HWY 27

City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR

Name CRAIG, SUSAN

Address 22000 HWY 27

City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR

Name OWEN, TOM

Address 22000HWY 27

City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name ULLMAN, JUNE

Address 1316 SOUTH HIGHLAND PARK DRIVE

City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR

Name MIFSUD, TRACY

Address 22000 HWY 27

City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name WEBER, PAT
Address 22000 HWY 27

City-State-Zip: LAKE WALES FL 33859