| BUCKLES, DAV<br>15304 TILDEN<br>WINTER GARD |  |                               |   |            |
|---|--|-------------------------------|---|------------|
| The above named                             | l entity submits this statement for the purpose of changing is | ts registered office or regis | tered agent, or both, in the State of Fle | orida.     |
| SIGNATURE                                   | : DAVID BUCKLES  |                               |   | 03/29/2022 |
|   | Electronic Signature of Registered Agent                       |                               |   | Date       |
| Officer/Dire                                | ctor Detail :  |                               |   |            |
| Title                                       | CHAIRMAN   | Title                         | DIRECTOR                                  |            |
| Name  | EDWARDS, RONNIE  | Name                          | GROSSHANS, TIM                            |            |
| Address                                     | 15304 TILDEN RD  | Address                       | 15304 TILDEN RD                           |            |
| City-State-Zip:                             | WINTER GARDEN FL 34787   | City-State-Zip:               | WINTER GARDEN FL 34787                    |            |
| Title                                       | SECRETARY  | Title                         | PRESIDENT                                 |            |
| Name  | HYDE, TRACY  | Name                          | BUCKLES, DAVID                            |            |
| Address                                     | 15304 TILDEN RD  | Address                       | 15304 TILDEN RD                           |            |
| City-State-Zip:                             | WINTER GARDEN FL 34787   | City-State-Zip:               | WINTER GARDEN FL 34787                    |            |
| Title                                       | DIRECTOR   | Title                         | DIRECTOR                                  |            |

### 2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N0100000628

Entity Name: FOUNDATION ACADEMY OF WINTER GARDEN, INC.

**Current Principal Place of Business:** 

15304 TILDEN RD WINTER GARDEN, FL 34787

## **Current Mailing Address:**

15304 TILDEN ROAD WINTER GARDEN, FL 34787 US

# FEI Number: 65-1067210

Name and Address of Current Registered Agent:

MEAD-HALL, DENISE

WINTER GARDEN FL 34787

WINTER GARDEN FL 34787

15304 TILDEN RD

BELANGER, RICK

15304 TILDEN RD

DIRECTOR

Name

Title

Name

Address

Address

City-State-Zip:

City-State-Zip:

### FILED Mar 29, 2022 Secretary of State 8511868132CC

Certificate of Status Desired: No

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 | E: DAVID BUCKLES  | PRESIDENT | 03/29/2022 |
|-----------|---|-----------|------------|
|           | Electronic Signature of Signing Officer/Director Detail |           | Date       |

Name

Title

Name

Address

Address

City-State-Zip:

City-State-Zip:

Continues on page 2

ROTH, BRUCE

15304 TILDEN RD

VP, EDUCATION

15304 TILDEN RD

GROSSHANS, CAROL

WINTER GARDEN FL 34787

WINTER GARDEN FL 34787

### **Officer/Director Detail Continued :**

| Title           | TREASURER                  | Title           | DIRECTOR                  |
|-----------------|----------------------------|-----------------|---------------------------|
| Name            | HORNE, CHANDA              | Name            | NELSON, WILSON            |
| Address         | 15304 TILDEN RD            | Address         | 15304 TILDEN RD           |
| City-State-Zip: | WINTER GARDEN FL 34787     | City-State-Zip: | WINTER GARDEN FL 34787    |
|                 |                            |                 |                           |
|                 |                            |                 |                           |
| Title           | DIRECTOR                   | Title           | DIRECTOR                  |
| Title<br>Name   | DIRECTOR<br>THATCHER, NATE | Title<br>Name   | DIRECTOR<br>GOODMAN, JOHN |
|                 |                            |                 |                           |
| Name            | THATCHER, NATE             | Name            | GOODMAN, JOHN             |