

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000614

Entity Name: MINNEOLA CHARTER SCHOOLS, INC.**Current Principal Place of Business:**320 E PEARL ST
MINNEOLA, FL 34715**Current Mailing Address:**320 E PEARL ST
MINNEOLA, FL 34715 US**FEI Number:** 45-0468799**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WATTS, SHERRY PRINCIPAL/CEO
320 E. PEARL STREET
MINNEOLA, FL 34715 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:** SHERRY WATTS

02/09/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VICE CHAIRPERSON
Name REYES , WHITNEY
Address 1110 LAKEVIEW OAKS DR
City-State-Zip: MINNEOLA FL 34715

Title CEO
Name WATTS, SHERRY A
Address 320 E. PEARL STREET
City-State-Zip: MINNEOLA FL 34715

Title OFFICER
Name HOSMAN, DAVID
Address 2128 LILYPAD LANE
City-State-Zip: TAVARES FL 34786

Title CHAIRPERSON
Name BOND, RICHARD MICHAEL
Address 11121 LAKE LOUISA ROAD
City-State-Zip: CLERMONT FL 34711

Title SECRETARY
Name SCHMID, JOHN
Address 1847 STANDING ROCK CIRCLE
City-State-Zip: OAKLAND FL 34787

Title TREASURER
Name SALAZAR, BARBARA SUSAN
Address 18325 STATE ROAD 44
City-State-Zip: EUSTIS FL 32736

Title MEMBER
Name PATTON, RON
Address 360 W. RUBY STREET
City-State-Zip: TAVARES FL 32736

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: SHERRY WATTS

PRINCIPAL/CEO

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date