

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006780

**Entity Name:** THE VINE HOMESCHOOLING CO-OP, INC.

**Current Principal Place of Business:**

1857 LAKOTNA DR.  
ORANGE PARK, FL 32073

**Current Mailing Address:**

1857 LAKOTNA DR.  
ORANGE PARK, FL 32073 US

**FEI Number: 27-3517309**

**Certificate of Status Desired: No**

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

RICHARD, SUSAN  
1857 LAKOTNA DR.  
ORANGE PARK, FL 32073 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: SUSAN RICHARD**

**02/14/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           RICHARD, SUSAN  
Address        1857 LAKOTNA DRIVE  
City-State-Zip: ORANGE PARK FL 32073

Title           ELEMENTARY DIRECTOR  
Name           WATERS, ASHLIE  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

Title           MS DIRECTOR  
Name           KINMAN, GRACE  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

Title           HS DIRECTOR  
Name           MEADOWS, JENNIFER  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

Title           SECRETARY  
Name           SMITH, SHANNON  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

Title           IT DIRECTOR  
Name           MOORE, LISA  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

Title           PRESCH DIRECTOR  
Name           METTE, LYDIA  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

Title           FACILITY DIRECTOR  
Name           ANDERSON, NATASHA  
Address        1857 LAKOTNA DR.  
City-State-Zip: ORANGE PARK FL 32073

*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: SUSAN RICHARD**

**TREASURER**

**02/14/2019**

Electronic Signature of Signing Officer/Director Detail

Date