

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000004632

**Entity Name:** CITY OF PALMS CHARTER HIGH SCHOOL, INC.

**Current Principal Place of Business:**

2830 WINKLER AVENUE  
SUITE 201  
FORT MYERS, FL 33916

**Current Mailing Address:**

2830 WINKLER AVENUE  
SUITE 201  
FORT MYERS, FL 33916

**FEI Number:** 20-4994481

**Certificate of Status Desired:** Yes

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

CONSULTING & PROFESSIONAL ASSISTANCE, INC.  
17874 DRACENA CIRCLE  
NORTH FORT MYERS, FL 33917 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name HUMFLEET, ALLEN  
Address 530 KELLER STREET EAST  
City-State-Zip: LEHIGH ACRES FL 33974

Title DVP  
Name LATTANZI, APRIL A  
Address 24 RICHMOND AVENUE NORTH  
City-State-Zip: LEHIGH ACRES FL 33936

Title D  
Name SCHIRRMACHER BAKER, INKE  
Address 20075 LAKE VISTA CIRCLE NORTH  
City-State-Zip: LEHIGH ACRES FL 33936

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:** APRIL LATTANZI

**VICE PRESIDENT**

**03/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date